1	IN THE UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF MISSISSIPPI
2	NORTHERN DIVISION
3	LISA CRAWFORD PLAINTIFF
4	VS. CAUSE NO.: 3:23-cv-140-TSL-MTP
5	VITALCORE HEALTH STRATEGIES, LLC DEFENDANT
6	
7	***********
8	
9	DEPOSITION OF LISA CRAWFORD
10	*****************
11	
12	Taken via Zoom videoconference,
13	on Tuesday, May 21, 2024, beginning at approximately 9:55 a.m.
14	
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16	
17	
18	
19	*********
20	CATHY M. WHITE, CCR Certified Court Reporter #1309
21	Notary Public
22	
23	
24	
25	

	Lisa Crawiord		
1	Page 2 APPEARANCES	1	Page 4
2	(All parties present via Zoom videoconference)	1	LISA CRAWFORD,
3			having been duly sworn, was examined and testified as
4	NICK NORRIS, ESQUIRE	3	follows:
_	nick@watsonnorris.com	4	EXAMINATION
5	Watson & Norris 4209 Lakeland Drive #365	5	BY MR. NORTHINGTON:
6	Jackson, Mississippi 39232	6	Q. Good morning, Ms. Crawford. My name is
	601.968.0000	7	Hiawatha Northington and I'm an attorney representing
7		8	VitalCore Health Strategies in an action that's been
	COUNSEL FOR PLAINTIFF	وا	filed in the United States District Court for the
8	HIAWATHA NORTHINGTON II, ESQUIRE	10	Southern District of Mississippi. Are you familiar
	hnorthington@grsm.com	11	with the lawsuit?
10	Gordon Rees Scully Mansukhani		
l	1000 Highland Colony Parkway, Suite 5203	12	A. Yes, sir.
11	Ridgeland, Mississippi 39157 601.427.6239	13	Q. Okay. I'm going to be asking you some
12	001.427.0239	14	questions about your complaint and the incidents
	COUNSEL FOR DEFENDANT	15	surrounding it. Have you ever given a deposition
13		16	before?
14	ALSO PRESENT: Jessica McLawn	17	A. Yes, sir.
15 16		18	Q. Okay. So you're familiar with the way this
17		19	works. And with a little caveat because we're doing
18		20	this via Zoom, I'm going to do extra special to make
19		21	sure that I take my time with my questions so our
20		22	court reporter can get everything down, and I'll
22		23	also you'll find me giving a little bit of extra
23		24	pause so that, you know, if there's any lag in
24			
25		45	communications or connections or anything, we can make
١.	Page 3		Page 5
1	Page 3	1	Page 5 sure that the court reporter gets everything down
1 2	INDEX		
1			sure that the court reporter gets everything down
2	INDEX	2	sure that the court reporter gets everything down clearly.
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Page 8 Page 6 1 received at Hinds for licensed practical nursing, have 1 insulin. Were you limited to only treating patients 2 you had any other specific educational or higher 2 that were diabetic? 3 educational training? 3 A. No, sir. Q. Okay. So you were -- that was just part of Just CPR certification. Okay. And is that something that you have to 5 your overall treatment in terms of the detainees or 6 maintain regularly? offenders who were being held there? I do, yes, sir. 7 A. Yes. sir. Α. 8 Q. Is that annually? Q. Were there any other specific kinds of I believe it's every two years. illnesses or diseases that you were required to treat 10 Q. Okay. And in the nursing arena, what job did 10 other than the diabetics? 11 you -- strike that. I'll ask a better question. 11 A. Oh, yes, sir. I mean, we had -- 720 was --12 Following you receiving your training at 12 there's many different areas there. 720 was just 13 Hinds, where did you first start using your LPN 13 where I originally started. It was the only area that 14 training? 14 had two nurses. My supervisor, Ms. Bessie Wheaton, 15 A. At Central Mississippi Correctional Facility. she put me there knowing that I was new to the, you 16 Q. Okay. And were you working for CMCF itself, 16 know, to the correctional nursing. So I had over --17 or were you working for one of its contractors? 17 720 was 720 patients, which were well over that. So I 18 I worked for Centurion, which contracted me 18 had a huge number --19 to CMCF. 19 Q. Right. 20 20 Q. Okay. What was your job title with Α. -- of patients. 21 Centurion? So 720 -- I'm sorry. 720 was the general 21 22 A. LPN, med distro nurse. 22 area that was assigned to the entire facility? Q. When you say "med distro," you mean medical 23 No, sir. 24 or medicine distribution? 24 It wasn't? 25 A. Medical distribution at the prison, yes. 25 No, sir. Med distro had different nurses Page 7 Page 9 Q. Okay. Were you required to do any time --1 assigned at different areas, but we were all to know, 2 that's bad phrasing. 2 all be able to work at any area at any time in case, Were you required to do any work at any 3 you know, there was an emergency or a need or someone 4 facility other than Central Mississippi? 4 didn't show up. A. No, sir. Q. Okay. And I guess that's probably a better So once you started working with Centurion as 6 way of framing what I was trying to ask earlier. So 7 an LPN, the only facility you were assigned to was in terms of the med distribution, med distro, was 8 Central Mississippi? 8 there any other area that you were assigned to other 9 than med distro? 9 A. Yes, sir. 10 Q. And what was your job responsibility as 10 A. No, sir. I was classified as med distro. 11 a medical distribution? Okay. And you mentioned Ms. Wheaton. I know 12 I was responsible for administering 12 you said she hired you, put you there. Would you 13 medications and insulin to the offenders. We 13 consider Ms. Wheaton your supervisor? 14 monitored their glucose and reported their glucose 14 A. She was. 15 levels. We did the KOP medications, which are keep on 15 ٥. Okay. And was she an RN? 16 person. We made sure they were processed and 16 She was an LPN. 17 delivered from pharmacy. Patient well-being, patient 17 Q. LPN. Okay. And she was employed by 18 instruction on the medications. We assessed vitals, 18 Centurion, as well? 19 pulse ox, blood pressure. We did stock supplies, 19 A. Yes, sir. She and I both later did become 20 medical stock supplies. We did medication inventory part of VitalCore. 21 for pharmacy and kept -- and reported to pharmacy, 21 Q. Sure. Yeah, I was going to get to that

24 within my scope of practice was done there.

22 reported to the providers and the supervisors, and I

23 delegated -- and any delegation from my supervisors

Α.

Okay.

22 shortly.

23

Page 10 Page 12 1 Yes, sir. A. But it was -- for me, it was med distro as 2 -- when you started? 2 far as our -- we were, I guess our little team group, 3 Yes, sir. 3 so where I was -- we normally worked one nurse to Α. 4 every area but 720. 720 had two nurses. So, yes, in Who was that? We had a chain of command. Ms. Sam Lampkin 5 a way, with me and whomever I was working with in 720, 6 and Mr. Paxton Page were the HSA and assistant HSA at we were away from the others. 7 the time. 7 0. Okav. 8 Q. So Ms. Lampkin was the HSA? 8 It's a quite large place out there. Α. Yes. sir. 9 Right. 10 Q. What was the second gentleman's name? I'm 10 You're familiar with it. Α. 11 sorry. 11 Q. Yeah, yeah. 12 A. Paxton Page. 12 And when you were working in med distro with 13 Q. Page. Okay. And when you started working at 13 Centurion -- well, two questions. First, I know you 14 Centurion, do you remember what your salary was then? 14 had to deal with offenders regularly. A. Around \$16 an hour. 15 15 Α. Yes. Q. And would you routinely work 40 hours a week? 16 Q. How often did you have to deal with the 16 17 I worked overtime in the beginning. I helped 17 Department of Corrections employees? Was it just as 18 fill in a lot, so yes, sir. 18 regularly? Q. And the overtime that you got, it wasn't 19 A. Yes, sir. 20 regular overtime. It just varied depending on the 20 Q. Yeah? So I know you didn't have to 21 circumstances? 21 necessarily report to anyone, but did you have a A. Well, Centurion had different pay. They did, particular point person that you would have to deal 23 you know, different pay levels on weekends and things 23 with in terms of Department of Corrections employees? 24 like that. So they had a lot of different pay than 24 A. When I first started, I -- everything mainly 25 VitalCore. 25 went through Nurse Bessie. Page 11 Page 13 Q. Gotcha. But in terms of how often you had to Q. Okay. 2 do the overtime, was it a regular set amount of If I had any problems, I went to her and she 3 overtime that you had to do, or did it just vary 3 went to everyone else from there. 4 depending on the need? Gotcha. When you started working at 0. A. It varied. Centurion, do you remember what date that was? I know it was sometime in 2018. Q. Okay. And they sometimes offered incentive pay, is 7 Yeah. April 16th. 8 what I'm trying to say. 8 Okay. And how long did you work for --0. Q. I understand. Okay. So when you began 9 Α. It was April 16, 2019. 10 working at Centurion and working within the Central 10 Q. 2019. Okay. 11 Mississippi facility, tell me about what you found Yes, sir. 12 when you started working there. Were you responsible 12 Got it. How long did you continue to work 13 for working -- I know you described that there were 13 for Centurion before VitalCore took over for 14 several nurses within where you were working. Was 14 Centurion? 15 there a small team that you were working with 15 A. I believe they took over in October of '20, 16 primarily or did that change, too, depending on the 16 2020. 17 situation? 17 Okay. And just so you know, this is not a 18 Okay. There's a whole medical facility here 18 memory test. A. 19 at the prison, at CMCF. So they divided us up and we 19 Α. Good. 20 were called med distro team, med distro. So we had --These dates might not be exactly, you know, 20 21 there was also a clinic, you know, where there was jive with some other stuff that we may have. I'm just

24 -- where the inmates are housed.

22 providers, there were RNs at all times, so -- and

23 there's quite a large area here we have of different

23

24

Α.

Q.

25 reason.

Okay.

22 trying to get your best recollection at this time.

But that won't be held against you for any

LISA CRAWFORD vs VITALCORE HEALTH STRATEGIES, LLC

Lisa Crawford on 05/21/2024 Page 14 Okay. 1 leaving. 2 In terms of then the lawsuit or the -- well, 2 Q. Okay. 3 let's go back before the lawsuit. Do you recall 3 A. And it was pretty traumatic. So kind of 4 filing an EEOC complaint against the Department of 4 everything else kind of leaves my mind, you know, when 5 Corrections? 5 I got caught in that situation. But I was leaving A. Yes, sir. 6 that day and -- to go home. My son and my father --And I know that eventually you amended the 7 my father -- their father, were waiting on me. They 8 complaint and brought in VitalCore. Do you recall 8 had to go to a family reunion. So as I was leaving, I 9 9 had to go down a long corridor to get out. There was 10 A. I do believe so. I mean, I didn't do it 10 no one in the one area of the -- where the -- the key 11 myself, but I know there was an amendment. 11 control. So I had to go down with what --12 Q. Right. I want to talk to you first about the 12 unfortunately, the only name I know for it is -- the 13 MDOC before you brought in VitalCore. 13 nurses told me it was rape trap hall, because it was a 14 Okay. 14 long corridor where, if an inmate caught you in there, 15 Can you explain to me what led you to filing 15 there was no way anybody could get to you. And they 16 the initial EEOC complaint? 16 knew that. 17 A. Yes, sir. The first incident I had against 17 Q. Did you say "rape trap"? 18 the MDOC was -- do I need to just tell you the date or 18 A. Rape trap hall. That's what the nurses tell you the whole thing, what happened? 19 called it. Q. Well, you know, you can tell me about it. I 20 20 Q. Okay. 21 may stop you and ask you some questions based on --21 22 Okay. Well, the first incident I had was 23 around June or July of '19. I was so still fairly new 24 there, you know. I hadn't been there too long. So 25 it's a large complicated facility there. You know, 25 you before them. Page 15

A. So you know -- and the reason I believe they 22 said that is because, like I said, it's a long hallway 23 where, if there's an offender there and he knows 24 there's no officers, there's no way they can get to Page 17

1 you have to go through so many procedures. You have 2 to go through security coming in the door. You have 3 to get to your nursing post. So the headquarters are

4 in RNC, which they're way over in another building.

5 What I'm trying to say here is, at 720, we're supposed

6 to have officers at all times. They're extremely

7 short-staffed.

Q. Okay.

So when I'm leaving, I'm going through kind 10 of a dangerous situation as it is because there was no 11 officer that day.

12 Okay. Let me stop you right there. When you 13 say "officer," are you talking about employees of MDOC 14 who were supposed to be there?

15 Well, yes, sir. They were understaffed.

16 Okay. But I just want to make sure, you're

17 not talking about somebody who was -- and this was

18 2019. So you're not talking about somebody that was a

19 Centurion employee that was supposed to be there.

20 You're talking about the MDOC folks that were supposed

21 to be there to, like, escort or protect you or

22 whatever?

Well, I can't say if there was not somebody Α.

24 there that should have been for Centurion that day

25 because all I can remember is what happened when I was

Q. Okay.

I have to go through there to get out into 3 the -- where they have visitation. It's a large room

4 they have visitation. So as I walk in there, I

5 immediately notice that, you know, it was full of

6 offenders. And so, you know, I've been through some

training already up front. I know where I'm at. I

8 know, you know, that they play games and, you know, so

9 I don't look at them.

10 Q. Right.

I walk straight to just try to get out. So I

12 had to go a little ways up and to go through key

13 control.

14 Q. Uh-huh.

15 Α. And at this point, I didn't even know if

anybody was in key control because there was no one at 17

the main place to let me out. I don't know the proper

terminology of that station where you can go straight 18

19 through out instead of having to go around through the

visitation hall. 20

21 Q. So when you say "key control," you're talking 22 about somebody who controls the opening and closing of

23 doors?

24 A. Yes, sir. And they have our vehicle keys

25 inside.

Page 18 Page 20 Q. Okay. 1 Q. Right. So I -- as I went there, I noticed that the Except they still could have gotten up that 3 gate was shut to let me out. So I did see an officer 3 hallway if they would have ran and they could have 4 inside the key control, because it's glass, because 4 come out through the -- so I had to go up to the end 5 they have to be able to see in to look at the 5 of the hallway to the right, and down through the long 6 offenders, and plus you, through the glass. So I 6 hallway, which -- and then go out through into the 7 went -- well, I waited at the gate because she saw me 7 visitation. So I knew, you know, if they wanted to, 8 standing there and, you know, she didn't open it. So 8 they could do anything they wanted. 9 I waited. You know, I didn't know what was going on, 9 Q. Okay. 10 so I waited. 10 So, you know, I froze with terror, really. Α. 11 Well, you know, about five minutes went past, 11 Q. Yeah, yeah. 12 you know, and I mean, that's a long time. It may not Α. 12 And my family was out there, and we had to 13 sound long, but when you're standing there with a 13 be -- you know, to get my children there a certain 14 large group of inmates behind you, you know, it's a 14 time. And so I started, you know, I started banging 15 long time, because at this point, I'm like, why is she 15 on the door, banging on the gate, you know, please 16 not opening the door. So I went to the window and 16 just let me out, and she just continued to ignore me, 17 knocked on it, and she picked the phone up. 17 you know, and I -- you know, about this time, you 18 Well, you know, I was getting concerned here 18 know, I'm going back and forth to the window and I'm 19 because why didn't you let me out. So I didn't turn 19 at the gate and the offenders are steadily saying 20 around because, all of a sudden, I knew -- well, the 20 things to me which were vulgar, you know, sexual 21 inmates are making comments behind me, on top of this, 21 comments. 22 because I'm a female. So I'm trying to ignore that, 22 So all I remember is that it's about 15 23 but they're starting to tell me, you know, they're 23 minutes now, and I saw a figure come in through --24 laughing, you know. She's not letting you out, you 24 there's another -- where you come in the front door to 25 know. And I'm not looking at them or engaging with 25 the facility. I saw a figure come in there and the Page 19 Page 21 1 them at all because I start thinking, well, if I have 1 gate, and I said, "Please help me," and the gate 2 to run, there's no way for me to get out of there. 2 opened immediately. I went through the gate and 3 And I immediately became frozen in panic, you know. 3 there's another gate that has to be open, because you Q. Now, the area where you're describing, is 4 get in that one gate, so --5 there anything that is separating you from the Q. Open one gate, get you in the space, then 6 offenders? open up the second gate, you get out? Yes, sir. Because in that space is where you A. No. No, sir. 8 Q. So basically, you may not be right there 8 can go into key control and get your keys, or they can together, but you're in the same space? 9 hold you there, whatever they have to do. 10 Oh, yes, sir. 10 So I went through that and she opened the 11 Q. Okay. And to go back a little bit, that 11 next gate, and I went through there, and I saw -- you 12 hallway, do you know how the offenders got to that 12 know, I noticed it was an officer, a special officer, 13 location or how they got where they were? 13 either K-9 or CID, was in all black. And as soon as I 14 Well, they're -- at the end -- Okay. Coming 14 came out to him, I had not said anything to him yet 15 up past the clinic, if they had had the door open, the 15 except he had heard me say, "Please help me get out." 16 visitation, I could have went right to go straight 16 She came out immediately. And her name is Officer 17 into visitation through a little laundry area, or I 17 Jenkins. Q. I was about to say Officer --18 could have went straight out through the main gate. 18 19 So that door was closed. So they had offenders -- so 19 A. I didn't know -- yes, sir, Officer Jenkins. 20 the offenders had obviously -- I can't say, I wasn't 20 I'm sorry. I didn't know it at the time until that 21 there --21 happened. She came out, I mean, in a very just fast, 22 Q. Sure. Yeah. 22 hostile manner, automatically -- and I haven't even A. -- to see if they went in there, but if I had 23 said anything to him. She comes out and she's like, 24 to -- they went through the door and then they shut 24 with a loud voice, you know, "Bitch, I didn't leave

25 the door so they could not come out.

25 you in there. I didn't lock you in that gate, " just,

Page 22 Page 24 1 you know -- and I put my hand up because I'm like So I went to my post that day at 720 and, 2 what, you know, what's going on here. I said, "Ma'am, 2 sometime that morning, Ms. Lampkin and Mr. Page came. 3 you can step back. You don't have to talk to me like 3 I believe it was Mr. Page. She had a male with her at 4 that." And I told her, I said, "That just says that 4 the time that was her assistant. 5 you did because I haven't even told this man about it. Q. Okay. 6 You know, that tells me you know what happened." A. And I wrote out a hand report to her and they Q. Uh-huh. 7 just sat in there in the break room at 720 and talked So she kept on being very hostile with me, 8 with me about it, you know, made sure that I was okay, 9 and I said -- well, you know, I didn't know what to 9 you know, that I understood that that's not tolerated 10 do. This was my first time ever to be in such a 10 there, that, you know, Centurion does not stand for 11 situation. I mean, I was shaking. And he just said, 11 that, and that this whole situation would be dealt 12 the officer said, "Ma'am, you need to write her up." 12 with. They assured me of that. And that was -- would 13 Q. You're talking about the officer that had on 13 happen that day. 14 all black? Now, did they give you -- Ms. Lampkin and her 15 A. Yes, sir. 15 assistant HSA, did they give any kind of document? I 16 Q. Okay. 16 know you said you wrote it up, but did they give you 17 And now his name as well the officer I any other kind of document that you had to provide to 18 called, they're in the reports. Centurion regarding the incident? 19 Q. Right. 19 They may have through Ms. Bessie in her 20 office that day. I can't recall at this moment. 20 He picked up the phone. I didn't even know 21 how to get to the phone to pick -- to call to the 21 Okav. 22 shift commander, who the shift commander is back in 22 Α. Because Ms. Bessie usually handled everything 23 720. So he picked up the phone and called back there 23 and, if I signed it in her office, you know, I'm not 24 into the captain who was on duty, the female. She was 24 sure at this moment. 25 a female. And she can tell that I was in panic and 25 Q. Okay. Did Ms. Lampkin or her assistant give Page 23 Page 25 1 any idea or understanding what the next step would be 1 terror. And she told me, you know, just calm down and 2 I needed to write an incident report, but she said I 2 for Centurion at that point or what they would be 3 have 24 hours. So she advised me to -- it was well 3 doing next? 4 noted that this had happened, and she told me I could A. I'm not sure, really. She did tell me --5 go ahead and leave. 5 they did tell me, but I'm really not sure of the Q. Okay. 6 process that -- what we went through after that Because due to the panic and all. I mean, I because, you know, there's a lot that happened after 8 was terrified. So she let me leave. And I left there 8 that. So I'm not sure, because I know, at some point, 9 and my husband -- I didn't have to get any keys that 9 we do go to the superintendent --10 day because my husband dropped me off that morning and 10 Q. Right. 11 he was there waiting on me. -- with this situation. So I'm not sure 11 12 And so the next day when I come to work, I 12 what -- how it got there from here at this moment. 13 went straight to Ms. Bessie with this. She was 13 Q. Okay. So, Ms. Crawford, going back to the 14 already waiting on me. So I went there and, from 14 incident, was there any ultimate kind of action taken 15 there, I told her everything that happened. She wrote against Officer Jenkins, the security officer, or 16 it up as far as the MDOC goes with the captain and the 16 whatever kind of officer she was, who was working the 17 male officer. She wrote all that into the report. 17 gate that you know of? A. I really do not know. I really can't say if 18 But I still wrote out a hand report. 18 19 Q. Right. 19 they said they reprimanded her. I'm not sure, because And she made sure I was okay, and she assured we were interviewed separately, of course, by 20 21 me they were going to handle this. Ms. Bessie was 21 Superintendent King, and I'm not sure who the other 22 really wonderful about, you know, she made sure I was 22 female was. He had, of course, someone with him. 23 safe. And I told her I was, you know, I would 23 Okay. But in terms of a hierarchy or 24 continue on as long as there were officers there, and 24 responsibility for her, she wasn't somebody who was

25 there were.

25 working for Centurion. She was working for MDOC?

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1 A. She definitely -- I mean, she's not a medical

2 worker, no, sir.

Q. Right. Okay. Did you ever learn of whether or not -- I know we talked about the situation on how

- 5 the hall was set up. Did you ever learn subsequently
- 5 the harr was set up. Did you ever rearn subsequen
- 6 whether or not there were MDOC officers who were
- 7 supposed to be there that weren't there or what the
- 8 reason was of why she was the only officer present?
- 9 A. To be honest with you, okay, I have so many 10 responsibilities as a nurse and with so many patients
- 11 that, you know, I really, as far as the MDOC and the
- 12 CMCF employees, Ms. Bessie handled that. You know, I
- 13 I couldn't -- I didn't have -- I had so much in my own
- 14 job and duties that --
- 15 Q. Right.
- 16 A. -- I can't really -- I can't answer a whole
- 17 lot for their employee situation, because there were
- 18 so many officers, so many changes of the officers, you
- 19 know, and I don't know how they work. I know they
- 20 were constantly short-staffed.
- 21 Q. Okay.
- 22 A. So I really can't answer for that, no, sir.
- 23 Q. Okay. That's fair. I was just making sure I
- 24 understood what you might know.
- 25 A. And that's very complicated, too. So we're

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- 1 about Officer Jenkins, you're alleging that there was
- 2 retaliatory action taken after that?
- 3 A. Yes, sir. She never -- she was very upset
- 4 with me after that with her actions.
- 5 Q. Tell me about how that -- what those
- 6 retaliatory actions consisted of.
- 7 A. When I -- she was still left, you know, there
- 8 to do some duties, which, you know, like I said, they
- 9 could get moved any time to any area, so I can't keep
- 10 up with her schedule. But when I would pass her in
- 11 the hallway, if I had to go into the clinic and she
- 12 was coming down the hallway in the facility, you know,
- 13 she was very harsh looking at me, you know, and very
- 14 rude passing me with her mannerism at the time, which,
- 15 you know, we didn't have another incident that I wrote
- 16 up, you know. I know -- I mean, I can't write up
- 17 every single, you know, incident. I'm not easily
- 18 offended, you know. But it was in '20, you know, some
- 19 time had went by, she started -- it was when she got
- 20 back. She might be stationed over there or she might
- 21 be stationed over at the other area. So -- but I know
- 22 it was in the earlier parts of '20 before we actually
- 23 had something hostile enough for me to write up again.
- Q. Okay. And tell me about what it was that 25 occurred that led you to write it up again.

- 1 at a situation where we have medical and we have the
- $2\,$ government officers and we have just MDOC officers.
- 3 So, you know, it's quite an interesting place to work,
- 4 I guess you would say, and it's quite complicated to
- 5 explain.
- 6 Q. Yeah. I understand. Would it be fair to
- 7 say, at least at the time you were working there, that
- 8 the Centurion medical staff was only there to provide
- 9 medical services to the offenders? They weren't there
- 10 to provide security services?
- 11 A. Well, no, they were -- I was told that I
- 12 would always have protection, an officer with me
- 13 through them. That was their job as far as I know.
- 14 Now, I was told that. They also -- Mr. Page was --
- 15 Ms. Bessie had explained to him that he was the
- 16 liaison between medical and MDOC. So they were
- 17 supposed to ensure that I was safe and I felt safe. 18 So, yes, sir, they did say that when I was hired.
- 19 Q. Okay. All right. Now, according to the
- 20 charge of discrimination, you allege that, after the
- 21 incident with Officer Jenkins and whatever write-up
- 22 you did about her -- I know it was characterized as a
- 23 grievance, but I'm not sure whether there was an
- 24 actual grievance. You can tell me whether or not that
- 25 was true. But either way, regardless, what you stated

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 1 A. Let's see. I know it was in '20. Well, she
 - 2 was -- she would be over there in 720 in which she
 - 3 would have -- like I said, I don't know her official
 - 4 title, because some officers can only be assigned to
 - 5 the buildings. Ms. Jenkins obviously has a higher
 - 6 title because she doesn't have to be assigned to one
 - 7 building, but she might be there some days. So she
 - 8 was in any area, is what I'm saying. So she might
 - 9 have been my on-call officer that handled all the
 - 10 other officers.
 - 11 Q. Okay.
 - 12 A. Whatever happened with the last time, I know
 - 13 at some point she's constantly riding in a golf cart.
 - 14 She's riding around in a golf cart. And in my area,
 - 15 in my medical room, I'm locked in behind bars and I do
 - 16 not have keys. So I can actually see everything
 - 17 that's going on from my window. We have two doors
 - 18 that come into a corridor in 720.
 - 19 Q. Okay.
 - 20 A. And they're responsible for letting out the
 - 21 offenders. So there's three buildings there, A, B,
 - 22 and C, which are full of offenders in each building.
 - 23 So -- well, I need you to kind of understand so you
 - 24 can understand where this is coming from.
 - 25 Q. Yeah, yeah.

					-			
				Page 30				
1	A.	Medical as	s medical nurses,	I have to run a	1	do	cut up,	you know.

- 4 Q. Okay.
- 5 A. We have a morning medication pass, a noon and 6 a p.m.

2 medication pass. So in the morning -- in the -- we

3 have three medication passes at this time.

- 7 Q. And when you say "pass," you're talking about 8 periods when you actually distribute the medication?
- $9\,$ A. Right. Where the offenders are allowed to $10\,$ come in to the room by however MDOC brought them. And
- 11 normally it was by buildings or zones, and there were 12 times that they were all out.
- 13 Q. Okay.
- 14 A. So Ms. Jenkins, I mean, she was -- she just
- 15 had -- you know, she was -- she just -- during any
- 16 time that she had to particularly come in around the
- 17 medical room for whatever reason, she would stare at
- 18 me through the golf cart. She would drive golf cart
- 10 '6 1 1'' 1
- 19 up as if she was driving through the room and she
- 20 would just sit there literally in the golf cart
- 21 staring at me through a medication pass.
- 22 Q. Uh-huh.
- 23 A. And I have another nurse with me, you know,
- 24 and she does not do that to them. So it's very clear,
- 25 you know, that something is not right on her end
 - Page 31
- 1 towards me. So there were many incidents. So I don't
- 2 know which one you're specifically speaking to as of
- 3 right now because there were --
- Q. I mean -- I'm just trying to -- I'm sorry.
- 5 Go ahead.
- 6 A. I'm not quite sure which one you're
- 7 pertaining to in particular because --
- 8 Q. I wasn't asking about a particular one. I
- 9 was just trying to get an understanding of which ones
- 10 that you thought were significant enough to lead you
- 11 to file a written complaint.
- 12 A. Okay. Well, she was making it very
- 13 uncomfortable for me to do the medication pass with
- 14 her intimidating stares, her mannerisms. She would
- 15 come in there and just sit on -- there's the bench.
- 16 She would sit on the bench literally, you know, and
- 17 she was so loud and she would be slamming doors or,
- 18 you know, messing with the offenders, you know,
- 19 causing them to get upset with her. You know, there
- 20 were already challenges here. You know, the
- 21 offenders, they don't come to the med room like
- 22 they're going to the doctor or --
- 23 Q. Right.
- 24 A. You know, they're fighting. That's their
- $25\,$ time to get their stuff going on. It's their time to

- do -- cut up, you know. But I learned to -- I was
- 2 trained -- I did take a training course from MDOC when
- 3 I first started. I already had taken courses about
- 4 mind games. I had already taken courses that -- and
- 5 Ms. Bessie had well prepared me, you know. But you
- 6 still have to experience it. So I had -- it was still
- 7 a challenge, you know, for me to give -- I have a
- 8 medication cart. In my area, there's two windows, as
- 9 I explained. There's two nurses there. We have a
- 10 medication side where there's nothing but oral
- 11 medications mainly.
- 12 Q. Okay.
- 13 A. And then we have a diabetic side.
- 14 Q. Right.
- 15 A. Where there's insulin given. And so there's
- 16 two lines formed here with the offenders coming in.
- 17 Well, I'm having to listen -- I have paper -- we're in
- 18 paper MARs at this time, medical records.
 - Q. Sure.
- 20 A. We have to, of course, document every
- 21 medication these offenders get. We have to flip to
- 22 their name, just say it was John Doe, we have to go to
- 23 D and look for John. Well, he may take six or seven
- 24 medications or maybe even two pages' worth. He
- _____
- 25 may have -- each medication may have to be given in a

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Page 32

- 1 specific manner. He may need education on one of
- 2 them. He may need -- he needs to hear what I have to
- 3 say.

19

- 4 Q. Right.
- 5 A. I have to make sure he is taking this
- 6 medication correctly. I may have to take his pulse
- 7 rate. He may have to have a specific number before I
- 8 can give him his heart medicine. I have to take his
- 9 pulse ox. I may have to give him an inhaler. He may
- 10 not be able to breathe at the moment.
- 11 Q. Right.
- 12 A. He may have a new medication that he needs to
- 13 know about. Now, I have him standing here with
- 14 hundreds of inmates out there cutting up, partying,
- 15 having a good time. They're not just -- there's not
- 13 having a good cime. They ie not just -- there is not
- 16 ever enough officers to run this correctly. So I have
- 17 -- this is called direct observation therapy, DOT
- 18 meds. At this particular time, we had DOT meds, keep
- 19 on person meds, which are KOPs. So this one I have to
- 20 directly observe them taking.
- 21 Q. You have to get the medicine, make sure he 22 takes it, document that?
- 23 A. Right. And so I may -- and then on top of
- 24 that, all of our medications are on a cart, and I'm
- 25 having to pop those medications out, different ones

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- 1 two drawers -- actually, I had four drawers in the
- 2 beginning, two little carts here. I'm having to find
- 3 that medication, make sure I get the right medication
- 4 out of those drawers, and make sure that this man
- 5 understands what he's taking, make sure he takes it at
- 6 the right time, you know, all of my normal nursing
- 7 duties here that are vital. This is his life and I $\operatorname{\mathsf{--}}$
- 8 so when the officer comes in and starts yelling at me
- 9 with force or staring at me with force, which -- or
- 10 riding the golf cart back and forth with force, or
- 11 slamming doors with force, or yelling at the inmates
- 12 causing them discord, well, I have to maintain my
- 13 composure and make sure this man's okay at no cost.
- 14 Q. Right.
- 15 A. I still have a license from the Mississippi
- 16 State Board of Nursing, no matter who I work for.
- 17 So -- and I take that very seriously, you know. So
- 18 anyway, she would interrupt that. When it came to
- 19 interrupting and putting my patients in danger,
- 20 that -- you're going to get wrote up for that.
- 21 Q. Right.
- 22 Α. Because when you enter that medical room -- I
- 23 understand you're an officer, you have your job to do.
- 24 I'm there to help these inmates, make sure they're
- 25 okay. They're my patients. I don't -- I'm not there
 - Page 35
- 1 to correct them. I'm not there to -- that's MDOC's 2 job.
- 3 Q. Right, right.
- But if she's not doing her job correctly and
- 5 she's got an issue with me that I don't have with her
- 6 and she's going to cuss me, say -- you know, verbally,
- 7 she's very loud, and she made it very clear with curse
- 8 words she did not like me. She made racial comments
- towards me at times, you know, and when she does that,
- 10 that's why I wrote her up.
- 11 Q. Right.
- 12 And she went overboard, way overboard.
- 13 And in terms of her doing those things, from
- 14 what you observed, those were things that -- those
- 15 actions that she was taking, she was as an officer,
- 16 but it was done -- the way it was done was
- 17 interfering with your providing the medical service?
- 18 Yes, sir, it was. And also, you know, it was
- 19 interfering with, you know, my overall well-being.
- 20 You know, I'm -- I don't like being called those names
- 21 or cursed at by an officer, you know. I get all kinds
- 22 of stuff said to me by the inmates.
- 23 Q. Right, right.
- But, you know, we're trained for that. You
- 25 can't be there if you're not trained for that. But

- Page 36 1 not by an officer. You know, they're supposed to be
- 2 working with me. A proper medication call, the
- 3 officer would be standing there at each door and they
- 4 would make sure that it went well for me as well as
- 5 for them when we had -- and which we did when the
- 6 right, you know, officers were there that didn't have
- 7 a problem with me, it went well, because we're having
- 8 to give this -- on top of all that, we're having to
- 9 give all this medication at an extremely fast pace
- 10 here.

17

23

- 11 Q. Right. Because you're on a time frame and 12 you've got to deal with a lot of --
- We never know what's coming up on top of 13
- that. We have security issues. There may be a
- 15 lockdown that puts us in -- I have to always be in
- 16 mode to go into emergency plan.
 - Q. Right.
- 18 Α. All right. It's all really in -- I get the
- 19 chain of command's permission, but I have to implement
- 20 a plan here. Okay. They're in lockdown. They have
- 21 to get medication. That is my job, to figure out how
- 22 to get it to them.
- Right. 24 You know, because I -- and this post, we're
- 25 the LPNs, so we're in charge here. Which anything

- 1 that happens above us that is above our scope of 2 practice, we need to call the charge nurse in the
- 3 clinic.
- 4 Q. Okay.
- 5 A. But, you know, they're quite a distance away.
- 6 So if a patient's convulsing or is having a seizure, I
- 7 have to run out the door and be on guard to protect
- 8 his head, you know, to monitor his seizures. Anything
- 9 could happen. These people are sick. There's so many
- 10 of them. And which that did -- you know, I was
- 11 constantly had to put -- stop med pass, lock the door,
- 12 run out, and protect inmates from seizures, busting
- 13 their head on the concrete, falling off the bench. We
- 14 had diabetic patients that would go into -- their
- sugars would be too low and they would start foaming
- 16 at the mouth. I had to run out there. I was the only
- 17 one there to make sure they were okay to get them to
- 18 the clinic. They couldn't -- the officers wouldn't
- 19 let them go. They had to be escorted or either they
- 20 had to be called in, and still an officer had to let
- 21 them in.
- 22 So there's quite an imminent part of danger
- 23 here, you know, going on at all times. I have to be
- 24 prepared for that. So when the officers, you know,
- 25 are attacking me and not helping me -- so my overall

	Lisa Ci awiui C	ı Oli	1 03/21/2027
1	Page 38 well-being is very important here, is what I'm saying.	1	Page 40 Q. Right. That's what I was getting at.
2	Q. Yes.	2	A. Yes, sir.
3	A. You know, because and when Officer Jenkins	3	Q. Okay. But in terms of those complaints with
4	was there or whatever her title was, she complicated	4	those ladies, were those things that you also, kind of
5	it so	5	in the same way you brought up the first incident to
6	Q. Right, right.	6	Ms. Bessie, were those incidents also brought to her
7	A unnecessarily, you know.	7	attention, as well?
8	Q. And that's what I was going to get at. Other	8	A. Yes, sir, they were.
9	than Officer Jenkins and her behavior either when we	9	Q. Okay. Let me fast forward a little bit. At
1.			- · · · · · · · · · · · · · · · · · · ·
10	were talking about the hallway or subsequently when	10	some point, Centurion changed to VitalCore. A. Yes, sir.
11	she was staring at you, were there any other officers	12	· .
12	at MDOC who were behaving in the same way?		Q. I think that was I don't remember the
13	A. Yes, sir. During that period of time, this	13	exact date. Sometime in, I want to say, May 2020; is
14	is relatively from which, like I said, this is a	14	that right?
15	lot of information and dates, but	15	A. I believe I believe I signed one in
16	Q. Yeah, yeah, yeah.	16	October.
17	A it's in 2020.	17	Q. May have been a little later. Maybe October.
18	Q. Yeah.	18	A. I'm thinking October, but, you know, it was
19	A. There were other female officers that they	19	2020 for sure.
20	kind of hung together or meshed. I don't know the	20	Q. It was sometime in 2020, for sure?
21	words for it. But they were friends at work,	21	A. Yes, sir.
22	co-workers, whatever they were together.	22	Q. Yeah. Okay. When that transition was made
23	Q. Yeah.	23	from Centurion to VitalCore, did your personnel on the
24	A. I had some issues with Sergeant Bass,	24	medical side change at all?
25	Lieutenant Franklin frequently. I mean, there were	25	A. It did, yes, sir.
	Page 39	1	Page 41
	times when there I had to write up an incident with	1	Q. Okay. How did it change or who did it change
2	Captain Davis. Warden Shivers was there at one time.	2	to?
3	I know those for sure	3	A. Ms. Bessie stayed as my supervisor in the
4	Q. Okay.	4	beginning. We lost a lot of nurses. A lot of nurses
5	A that I had incidents with, and they one	5	did not from med distro, our health care a lot
6	time specifically told me that it was due to you	6	of our med distro nurses did not stay with the change
7	know, they didn't want Ms. Jenkins, I guess because	7	
8	if she had gotten moved away from there, she wouldn't	8	Q. Okay.
9	be there with them, I guess. I don't know. I can't	9	A from Centurion to VitalCore. They a
10	answer for them.	10	lot complained about the benefits and the pay, and I
11	Q. Right. You wouldn't be able to know what	11	was just shocked a lot of them left, and a lot of
12	their rationale was.	12	nurses that had been this a long time. You know, I
13	A. Right.	13	can't answer why they left. I just now they did. And
14	Q. But they were you know, when you speak	14	they had voiced, you know, some of their concerns at
15	about Franklin, Lieutenant Franklin, and Sergeant	15	meetings. Ms. Lampkin was still there and Mr. Page in
16	Bass, those, again, were MDOC employees?	16	the beginning, as well. But now, it continued to
17	A. I believe, you know, because, like, there are	17	change, you know, but this in the beginning of it, it
18	government there's a CID force. There's a K-9	18	stayed with Ms. Bessie as supervisor, Ms. Lampkin as
19	force.	19	HSA and Mr. Page was there, as well, as HSA.
20	Q. Right.	20	Q. Okay.
21	A. Now, I don't know	21	A. But it did after that, it continually
22	Q. There are other there may be other	22	changed. VitalCore struggled to get their chain of
23	entities or agencies on	23	command and their
24	A. They're not VitalCore or Centurion employees	24	Q. Staffing?
25	as far as I know.	25	A. Right. They really did.
		1	_

Page 42 Q. Okay. But it changed drastically. It became 3 drastically where it was so few nurses, so -- I'm 4 getting ahead. I'm sorry. That's okay. I know it's a lot of --It really is. -- detail and a lot of things, a lot of stuff 8 going on, and it was four years ago. Α. Right. 10 I understand. Going back to your charge with 11 the EEOC, I know we talked about the sequence of you 12 letting people, for lack of a better term, at Central 13 Mississippi know what was going on in terms of 14 Ms. Jenkins and Franklin and Bass. Was there ever a 15 time that you elevated those complaints? (Audio 16 transmission failure.) 17 A. Your computer has froze up. 18 MR. NORRIS: I'm glad that -- I thought that 19 was me. 20 THE WITNESS: I didn't hear anything you 21 said, sir. You completely went out. 22 MR. NORTHINGTON: I'm sorry. I got a little 23 thing saying my internet connection was unstable. So

> Page 43 Was there ever a time that, you know, we

2 talked about the complaints that you made at Central 3 Mississippi going through Ms. Bessie. Was there ever 4 a time when you had to elevate those complaints beyond 5 Central Mississippi, like, to Department of 6 Corrections, itself, or personnel at DOC, yourself? There was one incident where Ms. Bessie 8 wasn't there at that date because, on weekends, she

9 might not be there. We might have to -- whoever is in 10 charge as far as charge nurse that day, that may be 11 who we had to -- if we had an issue with as far as a 12 medical emergency, and we always have her cell phone 13 number if she's not there. So I'm not sure if 14 Ms. Bessie was there this particular day, but I went 15 to -- me and my partner, Nurse Adams, we had went to 16 the restroom to go -- well, I had -- I mean, we're 17 kind of skipping over an incident that happened with 18 an offender, but what particularly took me over her 19 was when we went to -- we were going to the restroom, 20 because it's quite a distance, again, from -- we have

22 Q. Right.

21 no restroom in our med distro room.

24 let me ask it again.

25 BY MR. NORTHINGTON:

So once again, we're there, you know, from 24 5:30 in the morning. We're locked in there with no

25 restroom, no access to anything. We're locked in. So

1 it's -- when we go to the restroom, it's quite a 2 complicated process. We have to lock the doors, make 3 sure everything -- and go all the way to the 720 4 clinic unless there is an officer there that day that 5 can open up the hallway next to us, which has offices 6 down in it, and it's back behind the shift man. They 7 will open it and let us go use those restrooms.

8 ٥. Okav.

9 A. And so at this time that we were headed out 10 to the restroom, Nurse Beverly went in first and she 11 went to the restroom, but I was told I couldn't go to 12 the restroom by the young lady who was opening the 13 door. She told me, "I'm sorry, Ms. Crawford, it's not 14 me." And so I went to the shift command and I asked. 15 Well, they were sitting outside. It was Captain 16 Davis, I believe it was Warden Shivers, and Sergeant 17 Bass. 18 Q. Okay. They were there. And I told them I would

19 20 like to know why I can't go to the restroom. Warden 21 Shivers, you know, she looked at them. She was like, 22 you know, "What's going on?" We went inside to talk

23 about into the shift command office and I told Ms. --

24 Warden Shivers what the lady had said. Well, of 25 course, Captain Davis said she didn't -- that was not

Page 45 1 true, and Sergeant Bass, they acted as if it were not 2 true. But Warden Shivers called the young lady that 3 was working in shift command in the -- to come in 4 there, or she was working the gate, and she -- control 5 tower. She came down, came in there, and I stepped 6 out. And when I came back in, Warden Shivers had said, you know, she did confirm that she was told not 8 to allow me to go to the restroom in that particular 9 hallway. 10 So I said, well, you know -- and then Captain 11 Davis said, you know, "Well, you're always writing 12 people up. You're always, you know, messing with 13 Melissa, " or Ms. Jenkins, Melissa Jenkins, "You're 14 always messing with her. You're always trying to

16 I said, "No, ma'am, I'm not." I said, "I just need to go to the restroom. What does that have 17 18 to do with me going to the restroom?"

19 You know, she just kept on saying I was, you 20 know, basically a problem, you know, writing people up. And I expressed, you know, that's not my goal 22 here at all. I just want to go to the restroom.

23 Well, it didn't get worked out where I -- I just -- I

24 went out of there and went into the clinic to go to

25 the restroom. I just did not go down the same hallway

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15

start something."

Page 46 Page 48 1 as Ms. Adams. 1 know, threatening my life at times. So I came back to the -- we went back to the 2 Q. Yeah. 3 med distro room, you know, and I was very upset about And he said -- and I said, "And he was Α. 4 that at this point, and, you know, Ms. Adams is, too. 4 supposed to have been moved." And I said, "I went 5 She doesn't like that. And she doesn't like, you 5 through quite an ordeal with that." 6 know, mistreating me that way and discriminating like And I said -- he said, "Which offender," you 7 that. So I went myself. I knew I couldn't make it 7 know, because he didn't have his records in front of 8 through that day with -- because they were on duty. I 8 him. 9 was going to have to deal with them for the rest of 9 Q. Sure. 10 that entire day, sometimes --10 A. And I said, you know, John Smith, which he's 11 Q. Right. 11 also known as X Man. He knew him by X Man because 12 -- you know, we're there until 8 or 9:00 at 12 he's been there a long time, this offender. And he 13 times, but our -- of course, our time to get off is said, you know, "X Man here?" 13 14 5:30. That rarely happens. 14 I said, "Yes, sir." 15 So I went to Superintendent King's office. I 15 And he said -- you know, he just said okay. 16 walked over there. Or no, I walked to my car and 16 It was as if he noted it was there. 17 drove over there. So -- which, you know, you have to 17 You know, he told me, you know, he would look 18 have an appointment to see Superintendent King, but 18 into this. You know, I'm not quite sure of every word 19 T -there that went on, but he did assure me he would look 20 20 into it. So that's when I went above Ms. Bessie, that Q. Sure. A. $\operatorname{\mathsf{--}}$ just went. I walked up to his office and 21 21 day. 22 I asked his secretary would he be willing to speak to 22 Q. Okay. Okay. Now, I know you referenced it and I understand it's kind of hard to explain. 23 me, and I went in to speak with him and I told him 24 what had happened, you know. And he just listened. 24 Uh-huh. 25 You know, he asked -- he doesn't know both sides, so 25 But I want you to do the best you can. What Page 47 Page 49 1 about those incidents with Jenkins and Bass and 1 he's just listening. Well, you know, he did express, he knew that 2 Franklin, what about those incidents made you think 3 we had had problems in the past and, you know, and he 3 that what was going on was based on racial 4 had asked me, "Would you be willing to move to another 4 discrimination? 5 location, you know. A. Well, they told me. You know, they told me 6 straightforward that -- well, I would believe, you And I told him, I said, "No, sir, I don't 7 think that I should have to move from my location know, being called a white bitch or a white dog or --8 because, you know, they don't like me. I don't bother 8 there were all kinds of -- Britney Spears wannabe, 9 them. I don't have anything against them, except what 9 kind of, you know, they -- you don't belong here, why 10 they're doing here at work. We're at work. Whether 10 are you here, you need to be at a nursing home or, you 11 you like me or not, we're here at work. You put that 11 know, a children's clinic, you don't need to be here, 12 aside." 12 you don't -- I mean, they made it clear with, I 13 You know, he agreed. We talked about that. 13 mean -- you know? 14 And at this time, there is still an issue with an 14 O. Uh-huh. 15 offender that had messed with me down the hallway of 15 There were comments about Rosa Parks, you 16 that same bathroom. 16 know. I love Rosa Parks, but that's not what they 17 Q. Right. were referring to, you know. But mainly that. I 17 18 We had a -- I had an incident there with him 18 mean, they called me a white bitch, you know, white 19 and it was quite a process with him. And I told him, 19 dog. I was often called that and --20 you know, I said, "I've been through this" -- I 20 Did you ever get the sense that anybody at 21 basically told him, you know, "I've been through this, 21 Centurion was, for lack of a better term, condoning

22 the racial discrimination, the write-ups with

23 Ms. Jenkins," you know. And I said, "On top of that, 24 you know, they've left an offender there for quite a

25 few months," which, again, was a huge process of, you

those actions or allowing that behavior to happen?Like, for example, let me give you an example. So,

24 you know, we talked about how you brought the initial

25 incident with Jenkins and the door in the hallway to

Page 50 Page 52 1 Ms. Bessie's attention. 1 calling my supervisor, she said she didn't give a A. Right. 2 2 fuck, she was in charge there, and I guess she didn't Q. Did you ever get the sense that, when you 3 really think that I would. Well, I did call 4 would bring this stuff to Ms. Bessie's attention, that 4 Ms. Bessie and I told Ms. Bessie, and Ms. Bessie 5 she wasn't doing anything about it or wasn't getting 5 actually got up from her office and came down there. 6 it addressed in some way? 6 She had had enough. A. No. She -- Ms. Bessie did not like it. At Q. Okay. 7 8 one point after one of the incidents, I had asked A. And she came there herself and she came and 8 9 Ms. Franklin, Officer Franklin, Lieutenant Franklin --9 got me, made sure I was okay, I was -- well, I mean, 10 they changed frequently with their titles here. 10 for her to go with her, we went to shift command and 11 Q. Yeah, yeah. she addressed them about this whole thing, and she 12 told them this is -- she's a nurse here. 12 A. They've got ranks and it was -- I couldn't 13 keep up with all that. Well, she was coming into the 13 Q. Right. 14 hallway and then she would -- I mean, she had followed 14 And you -- this is her job here, you know, 15 me down the hallway, she had -- that -- after that 15 she's doing her job, and she said other things, but 16 incident with the inmate, those three women, well, 16 she was -- and Lieutenant Franklin would say, "Well, 17 Lieutenant Franklin and then Sergeant Bass and 17 that nurse. That nurse." 18 Jenkins, I didn't have that -- I mean, Captain Davis 18 And Ms. Bessie looked at her and she said, 19 "That nurse has a name. Her name is Nurse Crawford." 19 was, you know, just sometimes. 20 But that bathroom became an issue that day. 20 She stood in for me and told them don't call me any 21 She followed me down that hallway. She beat on the 21 more names, it's Nurse Crawford. So, yes, Ms. Bessie 22 door while I was just trying to use the restroom, made 22 did not, you know, allow that, and she was upset about 23 me very uncomfortable, you know, and asking me, what 23 it. So I wrote that up as a report, too, which she 24 are you doing in there, why are you in there, you 24 told me to. 25 know, just things like that. And, well, at one time, 25 MR. NORTHINGTON: Right, right. 1 she came into there and she was telling me, "hurry it Okay. Do you mind if we take a five-minute 2 up, Nurse, "you know, "You're going too slow," and 2 break? 3 things like that. (Discussion had off the record, not 3 Well, I'm trying to -- once again, they would 4 reported.) 5 say that I was talking or spending too much time with 5 (Recess.) 6 the inmate. No. You don't know what medicines I'm 6 BY MR. NORTHINGTON: 7 giving him. Once again, he might have to understand Q. Ms. Crawford, we were talking a little bit 8 this. His heart could stop if it's the wrong rate. 8 before about some of the incidents that occurred with 9 And she would just pick, pick like that, and I told 9 regards to Central Mississippi, and Franklin, and 10 her, please, you know, stop, just -- and I would, most 10 Bass, and Jenkins. 11 of the time, try to ignore it. 11 A. Uh-huh. 12 Q. Uh-huh. 12 O. What I'd like to do now is talk a little bit 13 A. She said -- this particular time, she said, 13 more in detail about the timing of your EEOC charge. 14 you know, "You don't belong here," but she didn't say 14 Α. Okav. 15 it -- I can't say it like she did. It was a very loud 15 And I know, initially, you filed the charge 16 verbal tone and I can't -just against Mississippi Department of Corrections; is 17 I understand. 17 that correct? 18 A. Yeah. So it sounds like she's been saying it 18 Α. I'm not sure what -- who all was in that 19 nicely here, but it's not. 19 complaint. 20 Q. Gotcha. 20 Q. Okay. At some point -- I think the date on 21 You know, she's yelling it loudly, you know. 21 the original charge was in November of 2020, and then 22 "Move along. You don't belong here." And she's 22 later, you brought in VitalCore in an amended charge,

23 calling me a white bitch again. And when she did

24 that, I said, "I'm going to call my supervisor." When

25 she called -- whatever she said, after I said I was

24

23 and that was in 2021. Does that sound familiar?

25 '20, towards the end. I know the amendment came

A. I know I filed the original with the EEOC in

LISA CRAWFORD vs VITALCORE HEALTH STRATEGIES, LLC

Lisa Crawford on 05/21/2024 Page 54 1 after. 1 some point, Ms. Adams was -- had had enough of the -2 Q. Okay. 3 you know, she had just, you know, she didn't like it. 3 Α. As far as the date, I'm not certain at this 4 moment. Q. That's fine. How did you go -- what was the 6 reasoning or rationale for amending the complaint to 6 year. And Ms. Adams was the other nurse that was 7 bring in VitalCore? 7 ٥. Well, as far as I remember, you know, working with you in med distro? 8 9 without -- you know, I haven't looked at my records. 9 10 Q. That's fine. I understand. 10 Okay. 11 There came a time where, you know, it wasn't 11 Α. 12 being stopped, it wasn't being dealt with, you know. 13 So with the EEOC I was dealing with, you know, I 13 Originally, she was supposed to be opposite -- I was 14 believe her name was Carleen Collins, I believe she training them to work opposite my shift because we 15 was -- yes, she was my worker. And then I started 15 didn't have -- we had lost some employees. Well, 16 having incidents from VitalCore employees there, as 16 Nurse Knight did not stay, as well, because of the 17 well. 17 hostility with -- because it had gotten in with -- the 18 Q. Okay. 18 hostility from the offender, John Smith, and the 19 So, you know, I'm not sure if it was at that 19 officers from that. Well, that was an issue. And I 20 point it happened in that amendment, but I did start 20 remember they did not want Ms. Adams to leave and 21 receiving some issues with our -- with my co-workers, 22 you know, as far as medical side, as well. Q. Well, that's kind of what I want to get at 23 assistant or what his title is here because we had 24 now, ask you some specifics about it. But before I some major, like, our higher-ups change --25 get into that specifically, when Centurion made the 25 Q. Right. Page 55 1 change to being -- I mean, when Central Mississippi -- and command, too, at some point. So they 2 made the change from having the medical taken care of 2 had come down to ask Ms. Adams to stay and not leave, 3 by Centurion to VitalCore, was there any conversation 3 and they told her that, you know, they would assure 4 that you had with specific new VitalCore people about 4 her that she would be able to be stationed at 720 5 the prior issues that you had with Department of 5 because, again, it's two nurses there and, you know, 6 Corrections? Like, I know Ms. Bessie was still there. 6 that's always a better thing than being alone at 7 another facility by ourselves. So she wouldn't count because she was 8 0. 0. Okav. 9 involved. But was there anybody, like, in upper 9 Α. Not facility, but another area. 10 management at VitalCore, that once VitalCore came on 10 Q. Location, yeah, yeah. 11 and was in charge, that you brought the prior 12 incidents up to them? 13 A. Let me think. 14 14 be moved from 720. 0. Okav. I had a phone conversation with Mr. Mallett. 15 Okav. 16 I know we had talked about Ms. Lampkin had -- I'm not You know, so, you know, I didn't think that 17 sure if this specific one, if this was the first time, was very fair. You know, I had been there a lot 17 18 but this is what's coming right now -longer than Ms. Adams and, you know, I didn't -- I

19 Q. Okay.

- -- to my mind as far as that goes. Like I 21 said, we had a huge amount of staff leave shortly
- 22 after VitalCore took over. So through the end of
- 23 2019, 2020, I believe somewhere in there, we had to
- 24 end up bringing in contracted nurses from somewhere
- 25 else that were just working contracted to us. And at

- 2 it had gotten really -- with all the hostility and,
- 4 It had gotten too much for her. She was fixing -- she
- 5 was going to leave sometime at the end of -- in 2020
 - - Right. Yes, sir. She was my main partner.
- She had actually had a partner herself. She
- 12 was brought in with her own partner, Nurse Knight.

- 21 Ms. Lampkin had come down, and it was with Mr. Peters.
- 22 Now, I don't know at what point he became the HSA

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- And so then Ms. Lampkin and Mr. Peters called
- 12 me in back there and told me that, you know, there
- 13 would be changes now to the schedule and that I would

- 19 didn't argue with her, of course, but I was just
- saying that that was an issue with me, as well.
 - Q. Okay.
- 22 Α. And it started moving --
- 23 So -- I'm sorry.
 - Α. That started -- sir?
- I didn't mean to interrupt you. I'm sorry.

21

24

Page 58 Oh, it's okay. I just know there started to 1 opposite rotation of me and Ms. Adams or whomever I'm

2 come changes there with that, and I remember, you

3 know -- well, I mean, I had a talk with Mr. Mallett on

- 4 the phone, and he had had other issues this -- you
- 5 know, I don't know if I'm even supposed to talk about
- 6 that because we --
- Q. Before you get to that, let me ask you a few 8 more questions about the prior and the change in your
- 9 schedule. Did Ms. Lampkin or Mr. Peters give you any
- 10 indication as to why the schedule change was being
- 11 made or what the rationale was for it?
- 12 A. I don't recall the exact -- they didn't say
- 13 an exact reason and, you know, it wasn't a very
- 14 pleasant, you know, atmosphere, whatever reason it
- 15 was. You know, when I expressed to her, you know, I
- 16 would like to stay in this area -- because, you know,
- 17 we have to know -- like I said, we already have the
- 18 offenders and it was -- I could go to any area and
- 19 work. We were trained to do that at times. But when
- 20 you have to move me to a whole new area, I've got a 21 whole new group of people to learn, and that's -- I've
- 22 learned this area, I've learned to, you know, have my
- 23 patients. If something's going wrong with them, I'm 24 kind of familiar with their sicknesses, you know, and
- 25 I liked it there. I liked the area I was in. So I
- Page 59
- 1 didn't understand, you know, why Ms. Adams could stay,
- 2 but I had to go.
- Q. Was the --
- A. And they did not tell me why. I mean, she
- 5 did not say.
- Okay. In terms of the change that you were
- 7 being asked to make or being directed to make, other
- 8 than the difference between you and Ms. Adams, you
- 9 know, you being there longer, was there any material
- 10 difference or any specific difference in your job that
- 11 changed from the change in schedule?
- 12 Well, it became a lot of extra duties in the
- 13 process of this because we were shorthanded.
- 14 0. Okav.
- We became real shorthanded. And I was --
- 16 ended up filling the duties of a lot -- in all areas.
- 17 You know, I was pulled to all areas and I had an
- 18 extreme amount of work on me because those medical
- 19 records in 720 -- like I said, we had over 720
- 20 patients. You know, there were hundreds and hundreds
- 21 of documents that -- medical records had to be
- 22 handwritten each month, at the turnover of each month,
- 23 and, you know, and I'm in -- there's no one there to
- 24 assist me or not enough people there. Normally,
- 25 it's -- if we have a full rotation, there's two on the

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- 2 working with. They're not there to do their part of
- 3 this -- 720 is the largest area there is and so I
- 4 ended up having to take that on myself to make sure
- 5 all of that was done, and also be pulled to other
- 6 areas. And I know there was a meeting that we had by
- 7 Mr. Peters, too, and in at that meeting, I think
- 8 Ms. Bessie has passed away at some point --
- 9 Q. Okay.
- 10 -- unfortunately, which was very hard for all
- 11 of us. And we're having a meeting, and there's a --
- 12 he's up there talking and there's a -- Nurse Barlow is
- 13 her name. She's in that particular meeting. And, you
- 14 know, at some point -- I mean, I'm in the back. I
- 15 haven't even, you know, spoken to her or looked at her
- 16 or anything. You know, she stands up in the meeting
- and demands that I leave 720. I mean, this is in 17
- 18 front of everyone.

19

21

24

- Did you know who Ms. Barlow was at the time?
- I did. She --20
 - Had you worked with her before?
- 22 Α. Yes, sir.
- Okay. Was she a nurse like you?
 - She was a nurse, yes, sir. She's an LPN.
- 25 She's another med distro nurse, but she mainly had

- 1 worked in the other areas, so we didn't -- she was
- 2 very -- she did not like me, either. She made it
- 3 clear. So we did not work together very often.
- 4 Ms. Bessie -- Ms. Bessie knew the situation, so she
- 5 kind of placed people not just on my side but on every
- 6 side that were compatible wherever they were working.
- She tried to do that to the best of her abilities. So
- 8 me and Nurse Barlow were not together very often.
- 9 But after Ms. Bessie passed away, things kind
- 10 of changed and, well, at that particular meeting, for whatever reason, she stood up and demanded that I
- 12 leave 720, you know. And that was horrific in front
- 13 of all my co-workers, you know. And I take very much
- 14 pride in my character, my work ethic, and that really
- 15 was a, you know, very huge turning point for me
- 16 because, not only did Mr. Peters agree with her, or I
- 17 don't know if he -- in that meeting, but he did not in
- 18 any way make her stop talking to me like that.
- 19 Q. Okav.
- Make her sit down. He didn't tell her in any 20
- 21 way to stop disrespecting me. And I mean -- and on
- 22 top of that, he left right out of there and changed me
- 23 off the schedule to out of 720. That happened, as
- 24 well.
- 25 Q. I was just about to say, was that change part

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1 of the original discussion that Ms. Lampkin had with

2 him or was -
3 A. No. This was all worked -- but I don't know

4 what they had going on behind, you know, but I do know

4 page 62

1 and

2

6 Q. Okay. Okay. Is there any reason to think, 7 from your perspective, that -- I know you described

8 that, when the schedule change was made, you'd be

5 it happened, you know, close together.

9 taking on more responsibilities. But from your 10 perspective, is there any reason to think that you

11 might have been given those responsibilities because

12 you had been there longer or because you had more

13 experience?

14 A. No. No, sir, because that was too much. It 15 was too much work. And, you know, it put an extra 16 pressure on me, and it was very hard, and I know, for 17 a period of time, I didn't have a co-worker, and I had

18 to work alone, and I was doing that by myself and --

19 so, no, I don't think it was because of that.

20 Q. I guess the question I have was because --21 and you may not know the answer, but if they're moving

22 you or making a schedule change to a new position,23 were you being moved to replace someone who had left,

24 or was it just a personnel shift?

25 A. No, sir. No one else got moved. Everybody

1 and plus, you know, I had been stationed there.

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2 Q. Right.

A. She was never moved from her stationary

4 position, and I have no -- nothing -- I like

5 Ms. Danzler. I have nothing against her. But she

6 remained in her position unmoved and, you know, I

7 didn't think that was --

8 Q. Is Ms. Danzler still there, to your

9 knowledge?

10 A. I do not know.

Q. Do you remember her first name?

12 A. Sherry.

13 Q. Sherry?

A. Uh-huh.

15 Q. Only reason I ask is I didn't remember seeing

16 her name in any of the documentation, so I wasn't

17 sure.

11

14

18 A. Like I said, there's a lot that goes on that

19 I didn't write up. You know, I couldn't write this

20 whole entire thing, but there's a lot that's going on

21 here, you know, that's affecting this whole situation,

22 as well.

23 Q. Yeah. So from your perspective -- I mean,

24 was Ms. Danzler also LPN?

25 A. She was.

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1 else stayed there, you know. In the other area, when
2 it comes down to -- like I said, there's a lot of

 $\ensuremath{\mathtt{3}}$ information here that this is a long time ago and a

 $4\,$ lot of things happened, because with our shift change

5 and, like I said, we're -- over at 720, we're kind

6 of -- I'm not -- I haven't always been called to every

7 meeting, is what I'm trying to say. It could be on 8 opposite rotation. I'm not around the administration

9 a whole lot, so I can't answer for what was going on

10 on their side at this point, but I know that, you

11 know, I had expressed that it was too much work, but I

12 still did it because of my commitment to my job and to

13 the duties I have as a nurse.

14 But one of the -- the only other nurse that I 15 know that had -- that we were there at the same time

16 that stayed with VitalCore through the whole thing was

17 Nurse Danzler, and she had caught -- it was kind of

18 like on the yard, it was the females, but they kind of

19 had a similarity of, like, the 720 clinic, but it was

20 males. And then there are many other areas where

21 you're alone. But Nurse Danzler had -- she was kind

22 of like -- she ran her area and I ran 720 kind of, but

23 we would move anywhere in need and help, but we

24 were -- you know, we could come in and handle that

25 situation in our area if we're more familiar with it,

Q. Okay. And in terms of her job

2 responsibilities, you would characterize them as being

3 similar to yours?

4 A. They were. The yard was similar in the way

5 it was ran except for there were less patients.

Q. Okay.

6

7 A. I think there might have been -- I can't say

8 how many women there were, but it was at least -- I

9 had at least 4- or 500 more patients.

10 Q. Okay. Ms. Danzler, is she a black female?

A. She is. I'm the only white female through

12 this whole situation, as well, in my -- in the LPN med

13 distro.

14 Q. Okay.

15 A. We mainly had LPNs in med distros. Most of

16 the RNs were in the clinic.

17 Q. Right.

18 A. But there were times they did come and work

19 with me.

21

20 Q. Okay.

A. Or wherever they were needed.

22 Q. I know in the complaint there is a reference

23 to Nurse Adams agreeing that the schedule change was

24 motivated by an effort to get you to resign; is that

25 accurate?

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A. I can't remember her exact words, but she did

- 2 feel that way. You know, I'm not sure exactly that
- 3 there was a lot happening at that moment, but she did
- 4 feel that they were trying to get me out of there.
- 5 She did feel -- she did feel that -- she felt, from
- 6 her point of view, her expressions to me, you know,
- 7 which I can't -- she can speak for herself.
- 8 O. Sure.
- 9 A. But she expressed to me that, you know, they
- 10 didn't want me there and she -- you know, it was very
- 11 noticeable and very un- -- because they didn't do that
- 12 to her. Like, even the officers, they didn't treat
- 13 her that way, you know. And it was very clear and
- 14 notable that there was something going on here that
- 15 wasn't just -- it wasn't -- and I wasn't doing
- 16 anything to them, period.
- 17 Q. Uh-huh.
- 18 A. Like I said, I had -- I value my work ethic.
- 19 Q. Do you remember Nurse Adams -- I know you
- 20 said she can speak for herself, but do you remember
- 21 her saying specifically or mentioning anybody
- 22 specifically at VitalCore representing that to her or
- 23 suggesting to her that, yes, Crawford needs to go, or
- 20 54550502115 00 102 0100, 705, 024,2024 10045 00 50, 0
- 24 anything like that, or is it just her general sense
- 25 about what was going on?

- Page 67
- A. She had heard things. She had heard her
- $2\,$ herself at times. There was a time she had heard in
- $\ensuremath{\mathtt{3}}$ the clinic or somewhere between our room and the
- $4\,$ clinic, she had heard that -- the female officers
- 5 talking, the black female officers, and she had heard
- 6 them talking to even the offenders at the time that
- 7 they had not moved, you know, saying they need to get
- 8 that white nurse out of there. I was often referred
- $9\,\,$ to as that white nurse, as well, that white nurse, in
- 10 front of Ms. Adams. And there were times she said
- 11 that and then, like I said, whenever Ms. Lampkin and
- $12\,$ Mr. Peters came, it was not a friendly vibe from them.
- 13 It was very notable even to Ms. -- because when I came
- $14\,$ out of there, Nurse Adams was sitting in her area, and
- 15 she looked at me and she shook her head, she said,
- 16 "It's not good, Crawford," you know.
- 17 Q. When you say it wasn't a good -- I want you,
- 18 to the best you can, I want you to tell me what you
- 19 mean by that. What was being done to make you feel
- 20 that way?
- 21 A. She directly told me that there would be a
- 22 schedule change in a tone that you're not going to
- 23 argue back, and I understood it, so I didn't, you
- 24 know. I'm not going to, of course, disrespect my boss
- 25 in any kind of decision she makes, you know. I might

- Page 68
- 1 not like it, I might have to deal with it, but I
- 2 didn't disrespect her at the moment, you know, and
- 3 argue with her or anything.
 - Q. Did you think she was being disrespectful
- 5 towards you in how she conveyed that change?
 - A. Yes, sir.
- 7 Q. Okay. Do you think the way she was conveying
- 8 the change to you was a result of some kind of racial
- 9 bias or do you think it was just her being, for lack
- 10 of a better term, assertive in the position so that it
- 11 would be conveyed to you that there was no moving or
- 12 no change that was going to be made?
- 13 A. I cannot speak for her motive.
- 14 O. Okay.

16

3

- 15 A. I do not know.
 - Q. And the reason I ask is because, you know,
- 17 in a situation like that, in that situation, you
- 18 didn't -- did you go into the meeting thinking that it
- 19 was something that was going to be discussed and you
- 20 were going to work it out, or was your understanding
- 21 that this is how it's going to be and there's no
- 22 debating about it?
- 23 A. This is how it's going to happen and there is
- 24 no debating about it.
- 25 Q. Okay.

- 1 A. But I had hoped to go to the meeting to have 2 my voice heard.
 - Q. Gotcha.
- A. I was kind of excited, you know, to have
- 5 some -- a chance, because I didn't get called to very
- 6 many meetings. So I was kind of excited to voice, you
- 6 Many Meetings. So I was kind of excited to voice, you
- 7 know, with the changes or whatever, just to be able to
- 8 speak, you know, freely. And I thought that time
- 9 might come, but, of course, it did not.
- 10 Q. Okay. Okay. Once that change happened, was 11 there anything else, from your perspective, that led
- 12 you to move forward with the EEOC complaint?
- 13 A. Well, I needed help. You know, I needed help
- $14\,$ and no one was helping, you know. It was like it got
- 15 worse. It kept getting worse instead of better.
- 16 Q. Okay.
- 17 A. You know, that's the only reason I went to
- 18 the EEOC in the first place, you know, because it just
- 19 wouldn't stop, and it kept getting worse.
- 20 And I genuinely had found the nursing field I
- 21 loved as an LPN. You know, I liked corrections. The 22 schedule worked well for me. It was within a good
- 23 drive for me. The 3/2 rotation worked perfect for me
- 24 as far as work with my family. Planning my -- I could
- 25 plan anything. I had my calendar. I was, you know --

Page 70 Page 72 A. So I don't know which area or which 1 I felt safer with two nurses than one, which I'm okay 2 with working -- I've worked the whole -- every area by 2 particular incident that I wrote up that was enough 3 myself, so -- but I liked -- I liked where I was and, 3 for me to do that. 4 you know, like I said, they just wouldn't stop, you 0. Right. I'm not sure. It was that I wasn't being heard or something 6 Q. VitalCore came in in the fall of '20. 7 wasn't being done, and I can't answer who's not doing 7 Uh-huh. Α. 8 what. That's the big thing here, is you've got so So it would be something, at least in terms 9 many people involved and I don't know who is working 9 of VitalCore, something they would be involved in 10 with who. I know I'm reporting to the proper 10 going forward. 11 authorities and the proper people. I mean, I had -- I 11 MR. NORRIS: Hiawatha, it's not necessarily 12 did report it to -- we didn't talk about the incident, 12 that. I can let you know, it was -- the charge was 13 but Warden Miller, he was -- I had reported to him at 13 initially filed against MDOC because we thought they 14 times. I had conversations with him. I had reported were the employer. 15 to Jeworski Mallett, deputy commissioner. 15 MR. NORTHINGTON: Right, right. 16 Q. Did you --MR. NORRIS: And MDOC came in and said, no, 16 17 A. I reported to him. And as a matter of fact, 17 we're not the employer. So we amended to include 18 the female officers, Smith, she was the one who helped VitalCore because they're the employer. 19 me send that e-mail to him because I didn't have his 19 MR. NORTHINGTON: Because they were the 20 e-mail address, and she knew. She told me, "Crawford, 20 employer. I got it. MR. NORRIS: Right. It's not that an action 21 you're being racially discriminated against. That's 21 22 what this is coming from," you know. So she helped, 22 happened in between those two things. 23 showed me where to go because I didn't know where to 23 MR. NORTHINGTON: Okay. 24 go to, where else. So I went to them for help. So I 24 MR. NORRIS: It was just that we found out 25 don't know if what they did, if they did what they did 25 that VitalCore was the actual employer. Page 71 Page 73 1 or didn't work out. I can't answer that. So I just MR. NORTHINGTON: Right. Okay. And that's a 2 know that I went to the EEOC for help and it didn't 2 little bit clearer. 3 work out from there, either. 3 MR. NORRIS: Yes. Q. Okay. And I guess that's what I'm kind of 4 BY MR. NORTHINGTON: 5 getting down to in terms of things that VitalCore was Q. And I guess, Ms. Crawford, what I'm trying to 6 doing versus things that the Department of Corrections 6 understand from you is that, you know, which one of 7 was doing --7 VitalCore's employees versus, you know, other A. Right. 8 employees would have been involved in what you allege -- that led you to add VitalCore to the 9 to be discriminatory activity? 10 charge. 10 A. Well, like I said, you know, there were 11 Uh-huh. 11 issues with -- from even 2019 as far as the women not 12 And I'm trying to make sure I understand a 12 wanting to work with me in the med distro, but 13 sense of what it was that VitalCore was doing outside 13 Ms. Bessie was there. You know, she kept that at bay 14 the issue with your schedule change, if there was 14 and she moved people around to work with me that 15 anything in particular that personnel of VitalCore was 15 weren't, I guess, weren't racially discriminatory or 16 doing, whether it was the HSAs or other nurses or, you 16 they would be willing to work to with -- for whatever 17 know, somebody else in some other position at 17 reason. Like, I can't answer for everyone, but I was 18 VitalCore that was doing that you felt was racially 18 treated differently. 19 discriminatory or, you know, creating an environment 19 Q. Yeah. 20 that was hostile for you. 20 And she had to schedule people and, you know, 21 Well, like I said, I mean, I -- and this is 21 like I say, I can work with anyone because we're at 22 general information here. You know, I don't know 22 work and, well, I don't have, you know, that in my 23 which year we're talking about here because it went 23 heart against anyone anyway, but -- so it wasn't just 24 from '20 to '21 to '22 to '23. 24 MDOC, you know. It was on both sides. But when Q. Right. 25 Ms. Bessie passed, you know, whatever those nurses

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- 1 that were left, you know, all I know is that it was
- 2 not easy for me on both sides. It had become -- I
- 3 mean, it just gets into extremely, you know, different
- 4 conditions.
- Q. Okay. Once VitalCore took over for
- 6 Centurion, was there any kind of procedure or meeting
- 7 process that you followed specifically with VitalCore
- 8 with regard to the racial discrimination claims that
- 9 you had? Like, just to give you an example, I know we
- 10 talked about previously you bringing issues to the
- 11 attention of Jeworski Mallett at the Department of
- 12 Corrections.
- 13 A. Yes, I did that.
- 14 Was there somebody at VitalCore that you came
- 15 to similarly about those particular kinds of
- 16 complaints?
- 17 A. Like I said, we went through a real big
- 18 change of our chain of command. You know, there were
- 19 times we didn't have one but for a few days. We
- 20 had -- I don't -- like I said, I don't know which
- 21 point we're at right here, but we had a change to
- 22 Ms. Lampkin was taken out of the picture.
- Q. Right. 23
- She was removed. And then Mr. Paxton Page
- 25 took her place as an HSA, and at that time, we didn't

1 during that change, like I said, I don't know which

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- 2 area we're in because it -- but during that change,
- 3 whenever I got a raise that week because I showed up
- 4 as the only one and the providers told -- called
- 5 Mr. Mallett in there -- and at this time, we're
- 6 talking to the -- Mr. Mallett, and I know Kathy Hogue
- 7 was in the picture at some point. I know -- I don't
- 8 know at what point Nurse Davis comes in as the new
- 9 HSA.

11

- 10 Q. Right.
 - Α. So like I say, all I'm saying is who's -- you
- 12 know, Paxton Page is still here for a little while,
- 13 because, see, he was already there, and I go back to
- work one day, he's not there. We have a new person
- 15 here. So it's all kind of chaotic, you know, just
- 16 from thinking about it without looking at my documents
- 17 here.

19

21

- Q. Right. Yeah, I understand.
 - So but Mr. Mallett and Ms. Hoque were very
- 20 well aware of the workload I was under and --
 - Q. Okav.
- 22 A. -- as well as Nurse Holloway. And so she was
- 23 aware. And at some point, they get Nurse Othello
- comes in. He's new there. And from the very first
- 25 day he walks in in the change, he comes down to 720 to

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- 1 have but -- obviously, I mean, for during the ice
- 2 week, I was the only nurse that showed up, period, for
- 3 the LPN. I worked the whole week with Paxton Page
- 4 and, like I said, I know Mr. Mallett came down and I
- 5 was the only one that showed up for work that week. I 6 worked the entire prison with Mr. Page to make sure
- 7 every area of that prison had medication before I left
- 8 that day, and I worked with him like that because
- 9 there was no one. I was left with every bit of the
- 10 720 by myself, any other area. I stepped in and, you
- 11 know, I helped them. I did my job.
- 12 And then around that time, we had Nurse -- we
- 13 had a new nurse. She just showed up that day. Nobody
- 14 even told me, because we didn't have -- there was not
- 15 a lot of people working there. Nurse Holloway showed
- 16 up one day, and she come to the room, and she told me
- 17 who she was, and that she had been brought there by
- 18 Dr. Singh, Singh maybe. Dr. Singh?
- 19 Q. Singh?
- Uh-huh. And she had worked with him and he
- 21 had asked her to come work there. And she is a black
- 22 female, just to be known of the situation, but I
- 23 trained -- we worked great together. It was
- 24 wonderful. We had a great work relationship at that
- 25 time, and we were having new staff come in, but -- so

- Page 77 1 orientate with me and Nurse Holloway, he lets it be
- 2 known right up front, you know, that he does not like
- 3 me and it's a -- he told me it was a culture issue.
- 4 You know, I didn't understand what they were talking
- 5 about with him and Nurse Holloway. So all this, you
- 6 know, kind of started sometime in the change.
- 7 Was Othello -- Othello wasn't an HSA, was he?
- 8 No, he was -- he was an LPN. He had come --
- 9 so he started as an LPN. Now, somewhere along the
- 10 line, he gets moved up.
 - Q. Okay.

11

- 12 We have -- I don't want to say we have --
- 13 it starts with the change with that, and then we go
- 14 into -- now, I don't know who comes along next, if
- 15 it's Nurse Davis. I know at some point Nurse Davis.
- Q. I know there was Page, Paxton Page, that came
- 17 after Lampkin. 18

A. Right.

- 19 Q. And I think Davis came after Page.
- 20 Okay. And, well, then there was a DON we
- 21 called -- I don't even remember his name. He lasted a
- 22 day. Then we had Nurse Cross come in. I think he
- started as an RN, but at some point, he goes to a 23
- 24 higher position. We have Nurse Naylor comes in at
- 25 some picture. We have Nurse Brown comes in at some

LISA CRAWFORD vs VITALCORE HEALTH STRATEGIES, LLC

Lisa Crawford on 05/21/2024 Page 78 1 point, becomes the supervisor. For a minute, we 2 didn't have any help, any steady supervision. 3 3 really take care of that many people. O. Okav. You know, we were just kind of left to -- the 4

5 ones who were there, I guess we just did our job and

6 tried to keep everything going. But, you know, I did

7 have, you know, the e-mail communications, you know,

8 with Ms. Hogue and Mr. Mallett about the workload that

I was under and --

10 Q. Does the name Diamonisha Brown sounds 11 familiar?

12 A. Nurse Brown, I think was Alita Brown. I'm

13 not positive. We didn't go by first names, just to --

14 Sure. I know.

15 Due to the prison setting, we --

16 Yeah, you didn't want to get too familiar, ٥.

17 right.

18 A. We all went by last names, which was very

important because, if the offenders found out your

20 first name, they, you know, they did come out to --

21 they have ways of getting out into the real -- we call

22 it the free world and contacting you.

23 Q. Yeah, yeah, yeah. I understand. I

24 understand.

25 A. As far as -- there were Browns, but I don't

Page 80 1 praise all the nurses because we really do, no matter 2 what area we're in, you have to really be dedicated to

٥. Right.

So I'm not sure about the Diamonisha name at 5 Α. 6 this moment.

Q. Okay. So the EEOC charge was then amended in 7 8 2021, but from your perspective, the things that you complained on or complained of were continuous at that time. In other words, they were still going on even though you had filed the complaint?

A. Oh, yes, sir.

13 ٥. Okav.

12

14

15

They were still going on.

Were there any other incidents or racial 16 incidents that stood out in your mind that happened subsequent to your filing the complaint in 2021, or amended complaint in 2021?

19 A. In 2021, I believe that Nurse Brown came in 20 and Nurse Davis. Nurse Brown made it very clear, too, 21 as well, that -- she actually did end up at some point

moving me because she ended up treating me very

23 harshly as far as even making me take orders from

24 CMAs, and she let me know up front, I mean, our very

25 first meeting with her.

Page 79 1 know which one without looking at her right at this

2 moment.

Q. Well, the reason I mention that name is 4 because I think that would have been the person that

5 was at VitalCore that you specifically filed a 6 grievance with. Does that sound familiar?

We had -- what was her name? I know I did

8 talk to someone from VitalCore, but as far as her

9 first name goes, I do not know at this moment, but it 10 is documented.

11 Q. Okay.

12 Because I had a supervisor Brown, as well.

13 Q. When you say "supervisor," was this another

14 nurse?

15 Yes, sir.

16 Q. Kind of like Ms. Bessie?

17 Right. They kept trying to get -- med distro

18 is a very heavy area of work, very important area.

19 Q. Well, you've got to deal with all the 20 offenders and --

21 A. Right. We see them --

22 Q. -- coordinate with --

We're with them all day long as far as -- if

24 you're in the clinic, you're with certain people at a

25 time. So -- and it's not just 720. You have to

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Nurse Holloway and I, once again, we went to 2 meet her. We went to RNC to meet her. We went in and

3 sat and talked with her, you know, let her know, you

4 know, we knew that respecting there would be -- every

5 supervisor is free to, you know, to be themselves and

6 do what they do, but we had expressed to her, you

7 know, that we worked well together, and when they

8 called us to the areas together, we could handle them,

9 because we had -- Nurse Holloway and I had worked for

10 a period without supervision. It was directly -- even

11 Ms. Hogue had to come. She came and worked 720

12 because we didn't have help there. I worked with many

13 different -- even people from different departments

that were, you know, that worked in intake or RNC or

15 RNs because there was -- we were so shorthanded at

this point.

17 But when we went in to meet, whatever time

18 frame she came in early on with Nurse Brown, we went 19 to meet her and find out what our new schedule was,

20 because there was no schedule posted where it normally

21 is. You know, we talked for a little bit. I don't

22 remember the full conversation, but when we -- she

23 said that -- she said, "Nurse Holloway, you know, if

24 you want to stay on, you know, you'll be stationed at

25 720."

Page 82 And she said, "Nurse Crawford, you're going 2 to be moved to" -- I'm not sure if it was the yard or 3 quick bed, but it was in the female area. And I didn't say anything, but Nurse Holloway 5 told her, she said, "No," she said, "Crawford's been 6 here longer than me. She can stay at 720 and I'll 7 move." 8 And, you know, I told her, "No, you don't 9 have to do that. If that's the point, I'll move." 10 So we left out of there not -- we didn't know 11 what the schedule was going to be. She had not made 12 the final decision at the moment, I don't believe. 13 But, you know, we went out of there to -- with Nurse 14 Holloway knowing, you know, that that was pure 15 discrimination. That was our words to each other, 16 and --17 So in terms of schedule then that you were 0. 18 subjected to from the time the change was made until 19 the time you weren't working there anymore, did that 20 schedule stay the same? 21

A. No, sir.

22 Q. How did it change?

- A. Nurse Brown started moving me around
- 24 everywhere. I mean, at one point, I didn't have even
- 25 have -- I was on a golf cart all day going around to
 - Page 83
- 1 every area just giving insulin, which that's almost 2 impossible because you have to -- you don't know what
- 3 -- if I go down to -- say I went down to quick bed,
- 4 they're just like a little closet, is the medicine
- 5 room. They do not have any supplies, because we don't
- 6 have -- so I -- it's very hard to get from point A to
- 7 point B out here if there's no golf cart. If there's
- 8 no -- if they haven't fixed the golf carts, they
- 9 haven't provided rides. So I'm having to walk in all
- 10 this, snow, these conditions, or driving, you know,
- 11 whatever conditions. I'm basically on a golf cart all
- 12 day going from building to building, giving insulin
- 13 and not having proper supplies there, having to --
- 14 trying to get supplies is a hassle and -- on itself,
- 15 and then on top of it, you have to work sometimes at
- 16 the officer's mercy and, if they don't have an
- 17 officer, you have to wait for them. So it was a
- 18 really hard situation she put me in. It was a very
- 19 undue stress.
- 20
- 21 So, yeah, it did change, and I was all over
- 22 the place, you know, for a little period of time
- 23 there, so ...
- Q. And in terms of the supervisor who was 25 putting you in those positions, was it just that one

- Page 84 1 person or was it additional supervisors who also kind 2 of kept that up?
- They kept it up. You know, I did get to go
- 4 back to 720 at some point, but it was always at either
- 5 an added building to 720, it becomes 720 and F, or 720
- 6 and the yard, or -- you know, at times, you know, it
- 7 just kept -- unnecessary additional stuff kept going
- 8 on after that.
- Q. Who was the supervisor that brought you back 10 to 720?
- 11 A. I do not know at the moment. I do know in my
- 12 notes because, like I said, we had -- even in
- 13 between -- I don't know if it was between Nurse Brown
- and the new supervisor. We had Nurse Michaels took
- 15 over for a couple of days or a week. I don't even
- 16 know how long she was in there. She might have been
- 17 the one. I don't know. There was so much change of
- supervisors there at that little moment, but I know I
- wrote on the report for Nurse Brown specifically. And
- 20 then -- but I don't know if it was her or Nurse Davis
- that put me back. I really don't.
- 22 Q. Okay.
- We had -- we had a different assistant HSA
- 24 for a few days. I don't know if he was a part at the
- 25 time. He didn't stay long enough. I doubt he was. I
- 1 think it was Mr. Bradley maybe.
 - Okay.
 - 3 And then we had -- so I'm not sure which one
 - 4 moved me back at this point, so I don't -- because
 - 5 Nurse Othello becomes supervisor somewhere right after
 - 6 Nurse Brown, and I don't even know why Nurse Brown's
 - 7 not there anymore. So I don't know which one put me
 - 8 back.
 - 9 Q. Okay. At some point then, you made the 10 decision that you were going to resign?
 - (Witness nods head up and down.)
 - 12 What prompted you to reach that conclusion?
 - 13 That was the hardest day of my life, if you
 - 14 want the truth, of my working career. I had never --
 - 15 I had wanted to -- because, you know, it was my right
 - to work, no matter where I'm at, and I loved, like I

 - said, I loved my job -- but for -- at the end had 17
 - 18 become so horrible.
 - 19 I had several incidents at the end, from '22
 - to the end of '22, but just at the end, since you
 - asked me specifically why I resigned, there was a CMA,
 - 22 Ms. Rogers. She had -- she had verbally attacked me.
 - 23 She had threatened to physically attack me. She had
 - 24 harassed me. She had done deliberate things. I had
 - 25 written her up. I had reported her. I had reported

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1 her -- her and Nurse Othello together were

- 2 absolutely -- I had it -- at some point, it got so bad
- 3 that I had to call, you know, the headquarters.
- 4 Ms. Hogue was made aware of Mr. Rogers, as well as
- 5 human resources, very wonderful lady there. They
- 6 assured me she would get -- after that, she would
- 7 never do that again, her threats and everything, all
- 8 the reports that are written on her.
- 9 Well, towards the end, around -- at some
- 10 point we're working together around Christmastime,
- 11 November, Christmastime, January, somewhere in there.
- 12 There's several incidents I'm skipping over because --
- 13 so you can kind of get an understanding of why I
- 14 resigned.

15 Q. Yeah, that's fine.

- 16 A. She had -- we had worked together, and she
- 17 wasn't supposed to even be around me, but she came --
- 18 she had came to work that day and we had worked -- we
- 19 were working together and, at some point -- I mean,
- 20 she wouldn't -- she didn't even want me to speak in
- 21 the room. That's impossible. I'm a nurse. She comes
- 22 at me in the middle of -- I'm at the insulin cart now
- 23 because she's -- she's not even a nurse. She's a
- 24 medical assistant, a CMA.
- 25 Q. Okay.

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- A. So she's on the medication side and I'm
- 2 trying to give insulin, which we have three clear
- 3 bottles of insulin on the cart. I'm having to watch
- 4 them -- I have to give an offender a needle. These
- 5 men can take that needle and run, they can stab each
- 6 other, they can, you know, do whatever they want if
- 7 there's no officer there.

Q. Right.

- 9 A. And trust me, we're skipping a lot, but they
- 10 know how to take needles. That's a big deal. And so
- 11 you have to watch that so closely. You have to watch
- 12 them take their insulin with all the chaos going on
- 13 $\,$ and document at the same time, reading the doctor's $\,$
- 14 orders, making sure their glucose is stable, making
- 15 sure there's nobody over here. So it's a very intense
- 16 process.
- 17 And I have Ms. Rogers literally come at --
- 18 she coming away from her cart, and I leave from my
- 19 cart, and at the same -- I don't know if it's the same
- 20 time to go another bottle of insulin. At some point
- 21 from there to there, she's coming at me or, when $\ensuremath{\text{I}}$
- 22 come back in, she comes at me so close that I can
- 23 physically feel her. I have insulin in my hand and
- 24 I'm back like this because she's over me with her
- 25 hands in fists at her side, the heat, I mean, just her

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- 1 face, her nostrils, telling me what she was going to
- 2 do to me, daring me to hit her back, push her. She
- 3 wanted me to. And on top of that, I'm trying to give
- 4 insulin. Okay? At the same time, she's trying to
- 5 harm me.

16

- 6 Well, you know, she's sitting there doing
- 7 that. I'm not going to hit her. I'm not there for
- 8 that. So I told her to hit me or get off of me. She
- 9 got off of me. Now, this is after she's been
- 10 reported. I left out of there and I went straight to
- 11 Mr. Eubanks, and I'm not sure if Nurse Riley was there
- 12 at the time and Nurse Lee. They told me they would
- 13 move her.

14 Q. You mentioned the HSA.

- 15 A. Yes. At this time he is, yes, sir.
 - Q. He was HSA. Okay.
- 17 A. And Nurse Lee is now -- I believe he's the
- 18 supervisor now, and there's Nurse Riley there, and
- 19 then there's Nurse Davis. They're all aware of her
- 20 actions against me. And I told them she put her body
- 21 on me, and I could have -- I believe I could have
- 22 pressed charges on her. I don't even know. I was
- 23 just -- at this time, I had been through so much with
- 24 her, she had done -- she had security. The security,
- 25 they had done some -- I wrote all of that up.

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- 1 But let me just stick to the point of why I
 2 resigned was the last day I was there, Ms. -- me and
 - 3 Ms. Dew at this time, Ms. Dew is working with me
 - 5 Ms. Dew at this time, Ms. Dew is working with me
 - 4 regularly, CMA, we're there and we're preparing for
 - 5 the weekend. She comes there and she's not supposed
 - 6 to be there. But she comes there with a group of her
 - 7 girls into that room, and we've already changed --
 - 8 they have actually changed the whole prison system 9 around. They moved the whole women, all of women to
 - are and are are more and more with a second and more are are a second and are are a second are are a second are are a second are a seco
 - 10 720, and all the men over to the other side of the
 - 11 prison. So I have a whole -- there's way many more
 - 12 women here. I have a whole new ball game going on.
 13 I'm having to learn their issues, listen to them,
 - 14 learn their ways of -- so that was extremely
 - 15 challenging by itself, and I'm confident I could have
 - 16 done it, but whenever she comes there that -- I'm not
 - 17 sure exact day. She comes there with those group of
 - 18 girls, she comes in the room and makes it known she's
 - 19 there, starts talking.

20 Q. This is Rogers you mean?

- 21 A. Yes, sir. Letting us now she's going to be
- 22 there this weekend, telling Ms. Dew orders, because
- 23 she wouldn't speak directly to me, but she wanted me
- 24 to hear it, because I'm actually the one in charge
- 25 there.

Lisa Crawford on 05/21/2024 Page 90 Page 92 1 What was Rogers position? 1 stayed away from me. I never did anything back to 2 her. 2 Α. CMA. 3 She's a certified medical assistant? Q. You're talking about Rogers now? ٥. Yes, sir. At this point, Ms. Rogers. It's just --5 well, it's all of it together. Q. Okay. But she would not -- if I would have spoken, Q. Yeah, yeah. I understand. 7 which I have tried, you know, to stand firm with Α. But this specific day, you know, she was 7 8 myself without disrespect, I knew there was going to 8 there and my body couldn't take it no more. I knew I 9 be conflict, so I didn't say anything. couldn't risk my license, you know, and I didn't want 10 Q. Who did she report to? 10 to -- I never want to kill somebody. I'm a nurse. So 11 She had the same supervision as me. We 11 I had to resign from there, you know, because the 12 were -- she worked in med distro. At some point, 12 environment was so hostile with the -- I couldn't do 13 VitalCore took out a lot -- instead of two LPNs, they 13 it. My body couldn't function. Somebody was going to 14 brought in some CMAs. 14 get hurt or I was going to lose my license. And so, 15 Q. Right. Okay. 15 you know, I resigned. 16 So I have now had to deligate because it was And for about -- shortly after that, I was 16 17 a whole new process. I had people under me. 17 diagnosed with PTSD from it, you know. And so that's 18 Q. Right. 18 why I resigned, though. It had become so much, the 19 And she was under me, which made it so 19 officers, the -- Nurse Othello had done a lot of 20 challenging because she would not let me -- even allow things in between here at the end. They had the 20 21 me to speak. And then while I spoke, she made fun of 21 officers on me so bad. They actually had inmates, him 22 me, my voice. She called -- I mean, she called me 22 and Ms. Rogers had inmates making vicious rumors about 23 some names. Like I said, she'd already threatened me. 23 me. The K-9 forces would be there watching my line so 24 She wasn't supposed to be there that day. When she 24 intently, you know, and they're -- this is -- it's a 25 came in there and she was saying that, my body started 25 very serious issues and -- to the point, so all this Page 91 Page 93 1 pouring out sweat while I'm trying to give -- I'm 1 is going on, too, as well, with Ms. Rogers. 2 holding a needle, trying to give insulin. Their 2 Right. 3 officers are short. These women are just pissed off 3 I'm getting left out of Christmas meetings. 4 that they're -- they don't want to be over there. I'm 4 I mean, like, at the Christmas -- I resigned in the 5 having to listen to that so the -- it was so intense 5 first of February, but at the Christmas party, you 6 that I started pouring out sweat. My body is just 6 know, and it all started just piling up so bad, you 7 pouring. My hair is soaking wet, trying to hold my 7 know. It was just, like, at the Christmas party, they 8 composure and keep my eyes on the insulin and the 8 harassed me, wouldn't even let me bring in my 9 needles and the ladies, and her in my ear basically. 9 Christmas gifts. Mr. Othello, which I have a -- the 10 And when we left that night, me and Ms. Dew, you know, e-mail where I have had a conversation with the chief 10 11 we were like, it's going to be all weekend with her. 11 CID officer because I knew, you know, I said something 12 You know, she made it clear. 12 was going on and it was my -- it was Nurse Othello had 13 Well, that night when I went home, I was 13 been working with the inmates, getting them to cause 14 laying in sweat. My body couldn't take it no more. 14 trouble, trying try to cause, you know, if you -- if 15 And I was so under pressure, I was like, I can't give the inmates ran their mouth and the CID got -- because 16 those women insulin and safely administer insulin to there's so much contraband going on there. 17 these patients and keep my composure and I'm pouring 17 Q. Sure. 18 out sweat. I was just -- my body was absolutely 18 All that's going on, all the corruption going 19 traumatized, I guess. That's what later came. 19 on. So they get word of that and make it look evident 20 So I knew I couldn't do it anymore. My 20 because Ms. Rogers had messed with my needles. She

21 had -- I had went back to work and had needles

22 missing, and I had -- all that was going to end up 23 going on my record at the Mississippi State Board of

25 going on my record de die Mibbibbippi bedee board of

24 Nursing.

25 Q. Gotcha.

21 health was at stake here, and I could not go through

22 another weekend with her. I couldn't. So it was the

24 because I loved it, you know, and it could have worked

23 hardest thing I ever had to do, was to leave there,

25 out if she had just done her job, if they had just

Page 94 They're -- if you get punished and you get

- 2 put in the back of that magazine, you know, that's on
- 3 my mind. I value my license here. They've got the
- 4 officers on me so heavily, they've got -- they're
- 5 so -- won't even let me bring in a Christmas gift.
- 6 Mr. Eubanks came up there at Christmas. I got the
- 7 gifts in. There -- there was a \$35 minimum, you know,
- 8 as far as the gift goes.
- Q. Right.
- 10 And if you didn't get a gift of that same
- 11 nature, whoever gave you a gift that was wrong would
- 12 be taken away and given back to them. Well, I was
- 13 given a Christmas gift that it had three dollar boxes
- 14 of candy from, like, the Dollar General or Dollar
- 15 Tree. I didn't say anything. Ms. Dew said,
- 16 "Crawford, you need to show them that." I said, no, I
- 17 can't take it anymore, you know, I can't take -- they
- 18 were aware of it. So it was getting done that way at
- 19 the Christmas party.
- 20 And then here comes January, you know, and I 21 also have the -- an e-mail where I sent the chief CID
- 22 officer where I had to actually go to him and find
- 23 out, hey, these officers are on me like this, these
- 24 inmates are telling me this, this, and this. If
- 25 there's something wrong, I need to know, you know.
 - Page 95
- 1 And it comes out that he said give me the names of the 2 inmates that are saying these things and your boss'
- 3 phone number, Nurse Othello. And so I did that, and
- 4 they did remove those inmates that were causing those
- 5 rumors, he did, the CID.
- Q. Okay.
- And so -- but that's all together right there
- 8 with Ms. Rogers coming in, you know, and doing what
- 9 she did.
- 10 Q. Okay.
- 11 And I just -- my body couldn't take it
- 12 anymore.
- 13 Q. I know you referenced a couple of times that
- 14 you had e-mails or notes or anything like that.
- Uh-huh.
- 16 Q. Could you give those to your lawyer to
- 17 produce to us?
- 18 Α. Yes, sir.
- 19 Because it may be something, you know, that's
- 20 there that might be relevant. I suspect that a lot of
- 21 the things -- did you maintain copies of charges or
- 22 the complaints that you filed with Centurion or
- 23 VitalCore? Did you keep those copies?
- A. I have -- I have all the -- well, I mean,
- 25 like I said, Nurse Othello was my authority that I

- 1 reported to first and I'd already reported to
- 2 Ms. Hogue about -- and Dr. Fawcett about what he was
- 3 -- how Nurse Othello had retaliated against me and
- 4 added one -- he had added a whole new facility, the
- 5 yard to me and 720.
 - Q. Okay.
- Α. And I had already told him that. So
- everything I'm saying is already documented.
- So those things would have already been, from
- 10 your perspective, already been documented in some kind
- 11 of way?

19

21

- 12 Α. Oh, yes, sir.
- 13 Whether it was written or at least, you know, ٥.
- 14 orally advised to somebody at VitalCore?
- 15 Yes, sir.
- Q. Okay. In terms of the posttraumatic stress 16
- 17 disorder you described, had you ever had any problems
- with PTSD prior these incidents?
 - A. No, sir. I was diagnosed with PTSD within a
- 20 week or two after I resigned.
 - 0. Okav.
- 22 Α. It was after I resigned soon. I'm not sure
- the exact date.
- 24 Q. Have you seen -- had you seen any other kind
- 25 of medical professional for anything like anxiety or

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- 1 panic attacks or anything prior to your resignation?
- Yes, sir. I had started seeing Dr. William
- 3 Johnson at Region 8 after -- sometime in '20, I
- 4 believe.
- Q. Okay.
- After it had gotten, you know, to the point
- to where I was coming home crying at night because of
- 8 the stuff that wouldn't -- was going on at work, you
- 9 know, and I didn't -- I'm a nurse, you know. It's
- 10 my -- I'm a new nurse, really. You know, my career is
- just starting. I don't want to -- so I had to go --
- 12 you know, I went to Region 8 to Dr. William Johnson
- 13 and he -- he was great, wonderful, helped me stay 14 strong, and I did go there, and -- for anxiety and
- 15 stress. But I did not have PTSD, you know. It was
- 16 treatable, what I had, and so -- but at the end, after
- 17 I resigned, when I went there, I was diagnosed with
- 18 PTSD.
- 19 Q. Okay. How did the treatment or the -- rather the symptoms that you were exhibiting for, like, 20
- stress and anxiety, how did that differ from what you
- 22 experienced when you were diagnosed with PTSD?
- A. Well, my body, like I said, those sweats were 23
- 24 from the stress and my fight or flight syndrome. My
- 25 body had been so traumatized by seeing all that, seen

Page 98 1 and been through, that it didn't know anymore when to 2 stop. I was constantly looking over my shoulder, even 3 though I'm not at work. I had started trembling. 4 That was the -- that's the worse one for me. I'm 5 right-handed, and that's my dominant arm, and whenever 6 it -- they would come on, the triggers and the PTSD 7 attacks, you know, my arm would start trembling and I 7 8 couldn't control it. Even now, I'm -- my processing is slow. 10 As far as, you know, even it messed with me 11 like that and I had those triggers, and I didn't know 11 12 what was going on, but it was the -- I started having 12 13 the flashbacks, nightmares, and like I say, when I was 13 14 diagnosed with that, I'm like, you know, I didn't know 15 how it would be different, either, you know. 15 16 Okay. Well, you know, it's just going to --17 I knew the veterans had it. You know, I've had a 17 18 little bit of training there as far as nursing school, 19 but I've never dealt with anyone that had it, and I'm 20 like I don't understand what PTSD is, but when it hit

It had really -- it has really been an

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1 experience, is all I can say, that I will forever

21 me, I knew something was wrong, you know, and I

24 PTSD is very real.

25

22 started having those, like I said, those symptoms I

23 explained to you, and I knew, oh, my gosh, you know,

2 be -- you know, respect to our veterans, because now I
3 know, when I look back, that I was in a war zone. I
4 was absolutely in a war zone, you know, with all
5 this -- the stuff I saw, with -6 Q. I was just about to ask you, what makes you
7 describe the work environment as a war zone?
8 A. It became so hostile, you know, and then,
9 like, on top of that, I saw inmates die for no reason.

A. It became so hostile, you know, and then,
like, on top of that, I saw inmates die for no reason.
I saw the fights. I saw young boys come up and just
cut their arms up with razors, pouring out blood. I
had to go in and find a dead man and do CPR on him,
you know, because he wasn't allowed out of the doors
in time to get to the -- and I wasn't even -- the
officer wouldn't even go in there. I did. They
wouldn't even come out of the tower. So I had to deal
with things like that, which I know would have been
okay if I didn't have to have all this other excess

19 from my own people going on here, but -20 Q. To be fair, a lot of that stuff that you're
21 describing would have gone on whether or not, you
22 know, you had issues with, you know, some of your
23 supervisors or co-workers or whatever because that was
24 the environment that you were working in.

A. Right. And I had did fine with that, you

Page 100 1 know. I've already seen all that, a lot of that,

2 prior to the change. You know, I had already seen a

3 lot what was involved in being a nurse there in the

4 prison setting. And I handled it very well, you know,

5 in my -- from my point of view.

Q. Right.

A. But it was the -- when my own, you know, my

 $\boldsymbol{8}$ $\,$ own co-workers and then the different officers, the

9 discrimination going on, all of it piled together,

10 when I look back, it's literally like I feel like I

was in a war, you know.

Q. That feeling -- I'm sorry. Go ahead.

13 A. I was there in the face of COVID, when COVID 14 hit.

15 Q. It's like you're reading my mind, because I 16 was about to ask you about that.

17 A. And that was absolutely horrific because we 18 had to go through -- we had to come up with an

9 emergency plan to move inmates to the separation when

20 they had -- we had to literally go push our carts down

21 to the buildings and give inmates, in the hallway,

22 medications or through a drawer. We had -- it was the

23 biggest challenge, you know, that I've ever been

24 through as far as nursing, you know, watching the --

25 but we did it and it was fine if you -- as long as you

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1 had -- the times that I had a co-worker that was -- we

2 worked together professionally, we did things like

3 that with no problems.

But when, you know, the harassment comes and

5 then the devious stuff going on behind the scenes, you

6 know, that's too much for me to handle. I can't -- I

7 didn't realize, you know, that it was doing my body

8 that way, you know. When I started sweats and

9 trembled so, that's when I see. When I look back at

10 all of it put together, I feel like I was a nurse that

l went to war and came home.

12 Q. Yeah. When we talk about some of the impacts 13 of the posttraumatic stress disorder, did anyone at

14 Region 8 or any of the specific doctors say

15 specifically that, yes, you know, I attribute this

16 PTSD in part to at least the discrimination or the

17 treatment that you alleged you received?

18 A. I have -- I was assigned a special PTSD

19 therapist as well as my normal doctor, Dr. Johnson,

20 and then Natalie Moody took over for him eventually.

Q. Right.

22 A. But my -- Cody Evitas -- I'm not really sure

23 how -- I'm not really sure, because I call him Cody.

24 Q. Right.

A. He's a therapist and he has been amazing.

21

Page 102 1 I'm telling you, he has -- he's trained to know what's 2 going on.

٥. Right.

- And he helped me stay straight, and he's 5 really helped me save my life, really. So he knows 6 that the -- what happened there was so intense for me, 7 he said, you know, even one -- even if just one of 8 those things had happened was enough to throw
- somebody.

3

- 10 Q. Yeah. That's what I was just about to ask 11 you. And I know, you know, even though you're a 12 nurse, you may not have had it expressed to you that 13 way, but did Cody or Dr. Johnson, have they ever said 14 that, you know, the PTSD was a combination of issues
- 15 with the lockdowns and COVID, plus the fact that you
- 16 were in a prison setting, plus the fact of the
- 17 allegations about the discrimination or the
- 18 harassment, did they ever put it to you that way, or
- 19 do you have any understanding on how they might
- 20 perceive that?
- 21 A. I mean, you know, they haven't just come out 22 and said those words like that, but they know that it
- 23 was the stress from work, not the job itself that was
- 24 causing these symptoms in me. Like, even high blood
- 25 pressure, my doctor knew that when I would have to

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- 1 leave because Nurse Othello, like, one time he made me 2 pick up the cotton balls, he nitpicked me about that,
- 3 and it -- my blood pressure went -- it's documented,
- 4 the blood pressure was so high, I went to -- there was
- 5 -- the doctor didn't have -- there was nothing he
- 6 could do because it's the stress causing that, because
- 7 it's okay without that.
- So I went to Region 8 to see the therapy, the 9 therapist, Jasmine. She knows. When I told her what
- 10 happened, she said that's not your fault, he did that.
- 11 That's work. And she deescalated me, and my blood
- 12 pressure came down.
- 13 So I believe, you know, they know that very 14 clearly. Cody, my therapist, knows very well what
- 15 caused it because he had to explain to me why I had it
- 16 or what's going on with it, what, you know -- or
- 17 mainly explaining to me that I have the -- how PTSD
- 18 works, you know, and that I will be okay, because it
- 19 was so intense for me, I mean, I basically completely
- 20 have lost control at one time of my whole, like, my
- 21 right side, you know, when I -- I've had to have
- 22 surgery, as well, in between all of this.
- So I mean, it's been very added traumatizing
- 24 me not to be able to function even. I didn't know if
- 25 my body was going to be okay because it was so bad,

1 but I've come a long way, so ...

Q. And you mentioned the surgery that you had.

3 Is that the surgery -- what kind of surgery was that?

- 4 I had to have a rotator cuff repair surgery
- 5 and torn muscle, and I'm not sure what the -- it was
- 6 -- he had to shave some bone. I don't know what that
- was medically called.
- 8 ٥. Right. Yeah.
 - And there had been some bursitis in there, as
- 10 well.

9

11

- Q. One of the things that your lawyer provided
- 12 to us in the course of the case was a listing of some
- 13 of your medical providers.
 - Α. Uh-huh.
- 15 Dr. Ramsey at Sports Medicine and Fitness
- 16 Flex Rehab. That treatment was for your shoulder
- 17 injury; right?
- 18 A. Dr. Ramsey is the treatment for my shoulder
- 19 injury. I did go to the physical therapy at Fitness
- 20 Flex, but I also have, through the -- my body was
- 21 so -- from the -- the PTSD actually causes you to have
- 22 physical symptoms. My body was so wore out and tired,
- 23 but as they worked out the arm part, you know, to get
- 24 relief there, I started having pain down my leg into
- 25 my knee. So I went and had that checked out, which it

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- 1 turns out it was not my knee, that it was my hip, my
- 2 right hip. But that's still in -- because I couldn't
- 3 go do an MRI because I couldn't lay on my back because
- 4 of the surgery. You have to be able to lay for 45
- 5 minutes, so it's kind of complicated right now as to
- 6 what actually, you know, is the -- I'm still a work in
- progress. I haven't had the MRI yet.
- 8 0. Yeah.
- 9 I'm in the process of doing that, but I know
- 10 that it's an effect -- whatever it is, my leg has been
- 11 affected.
- 12 Okay.
- Whatever the root of it is, we don't know 13 Α.
- 14 vet.
- 15 Q. Okay. From --
 - But I have been to therapy for it, as well.
- 17 I'm sorry.
- 18 Q. From your perspective, are you alleging that
- 19 any of the issues with your shoulder or your leg, are
- 20 you alleging that that's related to the allegations
- 21 about retaliation and discrimination?
- Well, they did not provide me a proper ride
- 23 to -- proper transportation to be able to get from RNC
- 24 to 720, you know, my work. That was their place to
- 25 provide me a way to get there, and they did not, and I

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1 had to, you know, you ride with the van that I got

2 into with the MDOC workers.

Is that -- was that movement that you're 4 describing, was that related to the change that we

5 discussed earlier, the change in your schedule?

It was. And it was also that and the change in MDOC. Or I don't know who made that change.

8 Q. Okay.

Α. Let me say that. Someone made a change where 10 we had to park at RNC, not at 720, which is a 11 considerably long way to walk by yourself in the dark

13 Q. Right. So you --

14 So I couldn't -- sorry. So they were --

12 with inmates walking around freely, no officer.

15 VitalCore was supposed to provide golf carts.

16 Q. Okay.

17 A. And they did, but if someone didn't charge 18 them -- and there was sabotage of the golf carts.

19 They -- that was known. There was not one that day,

20 there that day that worked or available, is all I can

21 say. So in the -- I had to take a ride with --

22 because it was in December, so it was very cold

23 outside.

24 And once again, we had to carry a backpack,

25 clear backpack, with enough food and water to last

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1 you. Our shifts were 12 hours, but we had to be there 2 longer, plus we could not leave to go to our vehicle

3 or leave the facility. So we were, like, on complete

4 lockdown once we got there. So I had a considerable

5 amount of water bottles to carry, and food for my --

6 you know, to stay through the day because, if you ran

7 out of water, in which I have, it's horrific out there

8 with no water and you can't leave, and you're not

9 leaving. If you leave, you're not coming back to

10 work.

11 So I had a heavy backpack, is what I'm trying 12 to say, and I couldn't walk that far with -- there was

13 no officer to -- they were shorthanded. It was me and

14 my co-worker, Ms. Dew. So we had to make a choice,

15 you know. The officer's there, he has another female

16 officer in the van. They offered us a ride to 720,

17 so, you know, that's where -- when I got into the van,

18 I had that backpack on, which I'm shorter than most,

19 and then when I stepped up to that van on that side, I

20 reached up to grab the side bar, but I guess they have

21 Plexiglass, like, because they had to have dividers in

22 there if they have inmates in there, which I couldn't

23 see it. It was dark because it was early, 5:15, 5:30

24 in the morning. So whatever time -- it stuck in my

25 hand and I fell just straight back out of the van, so

1 that's --

2 O. At that time, that wasn't -- that was a 3 Department of Corrections van you're describing?

4 It didn't have -- it was a Department of

5 Corrections worker. I don't know whose van it was.

6 There was a female officer that -- in there, as well,

7 that he took to the yard that morning.

8 Q. Okay. So that incident -- when did that 9 incident, that particular incident, occur; do you

10 remember?

11

A. In December, I believe, of '21.

12 Okay. Did you have to have any kind of 0.

13 emergent medical treatment following that incident?

14 I requested to get -- to be able to go to the 15 doctor. I asked for that because I didn't -- like I

16 say, I didn't have -- Nurse Othello is my chain of 17 command. I let him know what had happened. I wrote

18 him an incident report and he told me he would get

19 back with me on letting me know. He never did let me

20 leave my post that day to leave, but nothing was

21 broken on me. I knew that much. So, you know, I

stayed at my post because, if I left my post, I could

23 have been charged with abandonment of care, if he

24 wanted to do that.

25 Sure, yeah.

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With all that was going on with him, I was 2 not taking a chance. So he didn't provide for me to

3 have relief of duty, so I stayed that day, but I wrote

4 up the report so -- and he never got back with me and

5 told me about -- so I could go get, you know, at least

6 checked to see if -- I didn't feel anything broken.

Okay.

But I have written there my shoulder was Α.

9 sore, I did fall completely onto this right side and

10 roll over. It's kind of a down -- it was quite a

11 fall. But I was glad nothing was broken at the

12 moment. I literally got COVID, like, a few weeks

13 after that, within the next month. So, you know, he

14 never got back with me about medical treatment.

15 I continued to carry the backpack, but I was

16 -- it was so sore. I carried a rolling cart at times

17 to pull the backpack, put it was such a hassle with

18 security. They didn't want that. And then also we

19 had to go out of a back dock off of RNC which had

20 stairs, a stairway to get down. So pulling the cart

21 actually even turned out to be a real hassle. So, you

22 know, I -- sometimes I had to just carry the backpack

23 continually, and I -- like I said, I thought that it

24 was just a sore muscle from the backpack after the

25 fall.

LISA CRAWFORD vs VITALCORE HEALTH STRATEGIES, LLC

Lisa Crawford on 05/21/2024 Page 110 And the backpack was -- I'm sorry. 1 to our car. We had to be in 720. The drink machines 2 did not work, if there were, in the clinic. So we had Like, later on, it continued to be sore, you 3 know, after that. And when I stopped carrying the 3 to carry enough water, food, and whatever personal 4 backpack after I resigned, you know, I noticed that my 4 items, medication, that we had to have to get through 5 arm still felt kind of heavy, like I was, you know, it 5 the day. 6 was sore, but I had the PTSD going on at the same time Q. Okay. So what's been your status since you 7 and my whole body was going crazy, really, so I 7 resigned from VitalCore? Have you had any employment 8 thought it was just tense. 8 since then? So I got -- you know, I went to a massage A. No, sir. 10 therapist. I thought maybe that would work it out. 10 Q. Okay. And is that because -- why haven't you 11 It didn't. It continued to get where I couldn't sleep 11 had employment, is a better question. 12 at night or turn over and, you know, I was very 12 A. I haven't been able to focus to even get a 13 scared, to be honest with you, because I have PTSD on 13 job, you know, or even think about that, tying to 14 top of now an arm possibly, there's something going on recover from the PTSD and the rotator cuff repair. 15 in there. And sure enough, it got lined up when I 15 Q. Okay. From your perspective then, it was --16 went to the Mississippi Sports Medicine emergency 16 the reason that you haven't been able to get or look 17 room. for other work is related to the medical issues you've You know, they did an x-ray and immediately 18 been having? 19 put in to see Dr. Ramsey, and they put me through 19 A. Yes, sir. 20 physical therapy. They gave me a shot in my shoulder 20 Q. Okay. I know you're married. Is your 21 and he said to do physical therapy. Well, it didn't 21 husband taking up the load for income that you would 22 get better. It just kept getting worse. So he did an 22 have been making for the family? 23 MRI, and that's when he found that I needed to have A. He has. I exhausted my savings and he has --24 surgery. 24 he's trying to do his best, I guess, but he hasn't 25 25 been able to keep up with it, so -- but he has what --Q. You had the rotator cuff thing? Page 111 1 I'm in survival mode, so it has been a --Yes, sir. The backpack that you were using, was that, 3 like, with medical supplies and things that you needed 3 benefits or Social Security disability? 4 to go from different areas at the facility? A. Yes, sir. I did try to apply for Social

Α.

- It was -- the backpack was our personal 6 backpack.
- 7 Okay.
- 8 We had to carry our things in a clear 9 backpack to work at the facility.
- 10 I understand. Okay. I just wasn't sure 11 whether or not the backpack that you were carrying
- 12 around was you were carrying it because it was
- 13 containing medical supplies. But that's your personal
- 14 stuff that you had to take with you whenever you were
- 15 moving around the facility?
- 16 Right. But we did have to carry medical 17 supplies at times, you know, and I was responsible for
- 18 getting medical supplies for 720. So I did pick up
- 19 things there, too, you know. But the backpack is the
- 20 main thing that I carried on my arm. That backpack
- 21 was -- after the fall, you know, became excruciating.
- 22 Q. What all did you have that you had to carry 23 around?
- A. Like I said, we had to have enough water and 25 food because, at this time, we could not leave to go

- Q. Have you made an application for unemployment
- 5 Security disability. I was denied because of my
- husband's income. But the woman knew that I was --
- whomever I talked to, she called me back because she
- 8 knew that I was being sincere and I didn't have any --
- though he had income, I had no income, and I had no --
- 10 what he had was just what he could.
 - Q. Right.

11

- 12 And so he wasn't able to give me any income.
- 13 Well, she called me back and said that she would look
- 14 into trying to get -- seeing if I -- because I didn't
- 15 have enough for myself because you had to work five
- 16 years. So they were trying to see, her and her
- supervisor, if they could get enough credits from what
- 18 little I did work in the first of '23 'til February to
- 19 see if it would help, but I haven't heard anything
- 20 back about that.
- 21 Q. Okay. What about any kind of workers'
- 22 compensation benefits? Are you receiving those?
 - A. No, sir.
- 24 Q. Okay. But you're getting medical care.
- 25 That's being taken care of by workers' comp?

23

Page 112

	D 444		D 447
1	Page 114 A. No, sir.	1	you know. They're graduated now, but
2	Q. Who's	2	Q. A husband and kids are stress inducing for
3	A. My husband's insurance is paying for those.	3	anybody.
4	Q. I'm sorry. Your husband's insurance?	4	A. Right. And, you know, we we're a close
5	A. Yes, sir.	5	family, so, you know, we're I'm a hands-on mom, you
6	Q. Okay. Do you have an open workers'	6	know. I'm very involved. So I mean, I can that
7	compensation claim?	7	was just normal life, but whenever the work stress
8	A. I have I went to a deposition.	8	came in on it, you know, it just became too much for
9	Q. Okay. But at least until this point, you	9	me.
10	haven't received any medical benefits or any	10	Q. So it was really what you were experiencing
11	employment benefits from workers' comp itself?	11	at CMCF that led you to go from whatever management
12	A. No, sir.	12	Dr. Fleming was providing to really seeking out help
13	Q. Okay. Let me go back a little bit, fill in	13	from a specialist like Dr. Johnson?
14	in a few blanks, just going back to the anxiety that	14	A. Well, I mean, as far as, you know, who it
15	you were experiencing and the posttraumatic stress	15	came from, you know, just CMCF or whatever, but, yes,
16	disorder. Prior to the treatment that you've been	16	I went there work-related.
17	receiving since you resigned, I know you mentioned	17	Q. Gotcha. Gotcha. Okay. And you're still
18	that you had initially seen, I think it was,	18	seeing Dr. Johnson?
19	Dr. Johnson	19	A. No, sir. He is still Natalie Moody took
20	A. Yes, sir.	20	his place.
21	0 starting in 2020?	21	Q. Okay. So it's still Region 8, but it's a
22	A. Sometime around there.	22	different provider?
23	Q. Was there something specific that triggered	23	A. Yes, sir.
	your seeing Dr. Johnson back in 2020?	24	Q. Okay. All right. But you're still seeing
25	A. Well, yes, there was. It was work-related		Natalie?
	ii. Well, Jeb, elele was. It was well letated		Addition of the state of the st
1	Page 115	1	Page 117
	when I went there, but I would have to look and see.	2	A. Yes, sir.
2	Well, actually, it was an overall, because my		Q. She's a physician, as well? A. She took William's place, Dr. William
3 4	Dr. Fleming is my general practitioner.		
	O That I a rough rocallan doctor might Voch	3	
	Q. That's your regular doctor, right. Yeah.	4	Johnson.
5	A. Yes, sir. And he had helped me as much as he	4 5	Johnson. Q. What I'm saying, she's a doctor, too, or is
5	A. Yes, sir. And he had helped me as much as he could as far as it goes with anxiety and depression.	4 5 6	Johnson. Q. What I'm saying, she's a doctor, too, or is she a therapist?
5 6 7	A. Yes, sir. And he had helped me as much as he could as far as it goes with anxiety and depression. He's been my doctor for a long time, my main doctor.	4 5 6 7	Johnson. Q. What I'm saying, she's a doctor, too, or is she a therapist? A. Well, she's my doctor. She prescribes my
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24

23 everyday normal ...

Q. Sure, I understand.

A. I had a family, you know. I had two boys,

23 anybody specifically that you wanted to discuss about

24 your claim that was related to it? I know we talked

25 about -- initially we talked about Franklin and Bass

Page 118 Page 120 1 and Jenkins, and then it moved on to talk about some 1 meeting and he asked me, well, he asked me is 2 of the nurses that came along later, Rogers, that kind 2 everything okay or whatever, and they all said they 3 of thing. Are there any other names that specifically 3 were getting up to leave. And he said, "Nurse 4 you think were problematic that caused you issues? 4 Crawford, is everything okay with you?" A. I'd have to think about that one because And I let him know, I said, "well, I was told 6 that's quite a few years going on there. 6 I would do what they say and, you know, that was it." Q. I understand. Like I said, it's not a test. 7 And so he went no. You know, he had told 8 I'm just -- since I've got you here, I wanted to ask 8 them, he said this has got -- he said, "Nurse Crawford 9 you about anything that was specific that, in your 9 has been here. She's, you know, been a faithful 10 mind, is, you know, relevant to the claims that you're 10 nurse." I've worked with him. He stood in for me 11 making about the harassment or retaliation or 11 that day and I didn't get, you know, reprimanded or 12 discrimination specifically. 12 whatever Nurse Othello had intention of. 13 A. Well, Nurse Othello, he -- he had put a 13 And everyone left the office after he spoke, 14 meeting together one time which he caught -- he told 14 and I did stay with Dr. Brazier after that and --15 me in front of Ms. Dew that he just wanted to talk, he 15 because I was, you know, in tears. I was just so 16 was going to have a little chat with me, you know, but 16 grateful that someone had -- you know, did stand in 17 we thought that was rather odd. And he said, meet me 17 for me that day, you know. And so whatever -- I don't 18 in my office the next day, and when I went there, he 18 know what his intentions were for that meeting, but it 19 had put -- he had -- I walked into his office and 19 did seem that it was not a good thing going on there. 20 there was Nurse Davis, I believe Nurse Naylor, and 20 Honestly, I thought I was being set up to be fired or 21 Dr. William Brazier was in there, as well. 21 reprimanded on my record. 22 Q. Okay. 22 But after that, you know, he did -- the dates A. And so I was kind of thrown off that by that. 23 of the things he started after that, you know, it was 24 You know, I didn't know what was going on because, you 24 retaliation-wise to me, you know, and I thought that 25 know, like I said, Dr. William Brazier, I've worked 25 was -- that was a big moment for me. That really --Page 121 Page 119 1 with him from the very beginning. You know, he was 1 it really embarrassed me, my character, my work ethic, 2 the doctor. 2 everything, and put me on the spot like that and, like Q. He's the medical director there? 3 I said, in front of my peers and co-workers. So I A. He was, yes, sir. 4 would just like to add that. Q. Okay. Okay. Q. Okay. Dr. Brazier, he was the medical A. And so when I got called into the office director when Centurion was in charge, too? 7 for -- when Nurse Othello was -- I wasn't really sure He was there through Centurion and VitalCore. Do you know if he's still there now? 8 why I got called in there because he told me he was 8 9 going to have a little chat with me, but they were all 9 Α. I believe he recently passed away. 10 there, and he had had a series of questions asking me, 10 Okay. ٥. 11 kind of making allegations even towards me, something I believe so. 12 I couldn't even answer for because I knew I didn't 12 All right, Ms. Crawford. I don't have any 13 have any involvement in it. And Dr. Brazier was just 13 further questions for you at this time. Your lawyer 14 listening. It went on quite a while. 14 may have some for you. And then Dr. Brazier had to step out for a 15 16 medical emergency and, when he had stepped out, you 16 MR. NORRIS: I have no follow-up. Thank you. 17 17 know, Nurse Davis had told me, you know -- she hit the MR. NORTHINGTON: Okay. Thank you for you 18 table and she said, you know, "That's it. You know, 18 time. 19 you're going to do what he says. This is your 19 (Whereupon the deposition was concluded at 20 supervisor now, you know. 12:44 p.m., the same day.) 20 21 21 But still, I don't even know why I'm there. 22 Well, he -- I just said, "Yes, ma'am." You know, I 22 23 didn't say anything back because I knew it was what it 23 24 was. 24 25 And then Dr. Brazier came back into the 25

	Page 122
1	CERTIFICATE OF COURT REPORTER
2	I, Catherine M. White, CSR, and Notary Public
3	in and for the County of Rankin, State of Mississippi,
4	hereby certify that the foregoing pages, and including
5	this page, contain a true and correct transcript of
6	the testimony of the witness, as taken by me at the
7	time and place heretofore stated, and later reduced to
8	typewritten form by computer-aided transcription under
9	my supervision and to the best of my skill and
10	ability.
11	I further certify that I placed the witness
12	under oath to truthfully answer the questions in this
13	matter under the power vested in me by the State of
14	Mississippi. I further certify that I am not in the
15	employ of or related to any counsel or party in this
16	matter, and have no interest, monetary or otherwise,
17	in the final outcome of the proceedings.
18	Witness my signature and seal this the 6th
	6
19	day of June, 2024. Schlippy M history
20	(sullane Ty history
21	CATHERINE M. WHITE, CSR No. 1309
22	My Commission Expires:
	February 1, 2026
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24	
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